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ABSTRACT

This analysis of survey activities of the Accreditation Council for Services for Mentally Retarded and Other Developmentally Disabled Persons (ACMRDD) is designed to provide program administrators and state agency officials with comprehensive descriptive information on 296 surveys conducted by the council from 1980 through 1984. Part I of this report summarizes the ACMRDD survey process, the method of the study, and the agency classification system used by the project. Part II presents study results in five sections: (1) analysis by type of agency (large or small, public or private, residential or nonresidential); (2) agency and client characteristics in the most recently surveyed agencies; (3) analysis of this data by type of agency; (4) the impact of previous surveys on the agencies' success with accreditation; and (5) identification of critical accreditation standards. The third part of the report presents a summary, suggests additional research, and offers recommendations to the ACMRDD and to agencies seeking accreditation. Among recommendations for the use of the survey are improving and consolidating formats for data collection and modifying the survey application form to facilitate completion by the applicant agency and to consistently solicit relevant data. It is also recommended that those agencies comtemplating the survey should conduct a simulation of the actual survey experience. Twenty tables and 13 charts supplement the text, and eight appendices, making up nearly half the document, include survey and data collection formats, statistical summary of agency and client characteristics, enumeration and ranking of critical standards, and enumeration of standards with which all agencies were assumed to be in compliance. (CB)

PUBLIC POLICY MONOGRAPH SERIES NUMBER 20

ACMRDD ACCREDITATION:
ANALYSIS OF NATIONWIDE SURVEY RESULTS,
1980-1984

by

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CONTENTS

LISTING OF TABLES AND CHARTS
ACKNOWLEDGEMENTS

PART I: RATIONALE AND DESIGN OF THE STUDY

- Introduction . . . 1
- The ACMRDD Organization . . . 2
- The Standards . . . 3
- The ACMRDD Accreditation Process . . . 6
  - Application for Survey . . . 6
  - The On-Site Survey . . . 6
  - Survey Report . . . 7
- Methodology . . . 8
  - Confidentiality . . . 8
  - Collection of Data . . . 8
  - Verification of Data . . . 9
  - Analytic Procedure . . . 10
    - Determination of Critical Standards . . . 10
    - Developing a Classification System . . . 11
    - ACMRDD Descriptive Data . . . 11
    - Analysis of Agency and Client Characteristics . . . 14
  - Limitations of the Analysis . . . 14

PART II: RESULTS

- Outline of Results Sections . . . 16
- Section 1: Overview of ACMRDD Surveys, 1980-84 . . . 17
  - Accreditation Decisions Since 1980 . . . 19
  - Surveys by State . . . 22
- Section 2: Characteristics of Currently Surveyed Agencies . . . 25
  - Large Residential Agencies . . . 27
    - Staff Ratios . . . 28
    - Functional Levels and Age . . . 29
    - Proprietary Agencies . . . 31
  - All Agencies Surveyed by ACMRDD, 1983-84 . . . 32
  - Small Residential Agencies . . . 33
  - Non-Residential Agencies . . . 34
    - Residential Components of Non-Residential Agencies . . . 37
- Section 3: Additional Analysis of Agency Characteristics . . . 40
  - Clients Served . . . 40
  - Staff-to-Client Ratio . . . 44
  - Median Number of Clients . . . 46
  - Median Number of Staff . . . 46
  - Severity of Clients Served . . . 46
  - Children Under 18 Years of Age Served . . . 48
  - Median Years in Operation . . . 48

CONTENTS (Continued)

Section 4: Impact of Previous Surveys. 51
Section 5: Identification of Critical Standards. 55

PART III: SUMMARY AND CONCLUSION 58
Items Related to Accreditation Outcome 60
Critical Standards Identified 62
Additional Research. 63
Subsequent Analyses. .63
Future Research Efforts. 64
Evaluation of Small Private Agencies. 64
ICF/MR Standards. 64
Validation. 65
Recommendations. 65
To ACMRDD. 65
To Agencies Contemplating Survey. 66

REFERENCES. 68

PART IV: APPENDICES--

1. Application for Accreditation Survey (A.A.S.). A-1

2. Survey Report format. .A-9

3. Sample Data Collection format. A-23

4. Statistical Summary of Agency and Client Characteristics (Comparing 1980-82 Surveys to 1983-84 Surveys) A-27

5. Enumeration of Critical Standards:
   a) Large Residential Agencies. A-35
   b) Small Residential Agencies. A-38
   c) Non-Residential Agencies. A-41

6. Ranking of Critical Standards for All Agencies. A-44

7. Ranking of Critical Standards in Order of ACMRDD Standards. A-57

8 162 Standards With Which All Agencies Were Assumed to Be in Compliance. A-70

TABLES AND CHARTS

PART I: RATIONALE AND DESIGN OF THE STUDY

TABLE 1--Outline of ACMRDD Standards. 3

TABLE 2--ACMRDD "A" Standards by Major Section, & Percent Applicable to All Agencies. 5

TABLE 3--Classification of Agencies Surveyed by ACMRDD, 1980-84. 12

PART II: RESULTS

TABLE 4--Annual ACMRDD Surveys, by Type of Agency. 17

CHART 1--ACMRDD Surveys, 1980-84, by Type of Agency. 18

CHART 2--Percentage of Agencies Accredited by Type, 1980-84. . 20

TABLE 5--Annual Accreditation Decisions Agencies, by Type of Agency, 1980-84 21

CHART 3--State by State ACMRDD Surveys, 1980-84, by Accreditation Decision 23

TABLE 6--State by State ACMRDD Surveys, 1980-82 Surveys Compared to 1983-84 Surveys. 24

CHART 4--State by State ACMRDD Surveys, 1983-84, by Type of Agency 26

TABLE 7--Characteristics of Large Residential Agencies Surveyed by ACF/MR in 1973-74, Compared to ACMRDD Surveys, 1983-84. 27

TABLE 8--Staff Ratios in Large Residential Agencies Surveyed by ACMRDD, 1983-84. 28

TABLE 9--Severity of Retardation and Age Characteristics in Large Public & Private Residential Agencies Surveyed by ACMRDD, 1983-84 29

CHART 5--Staff, Clients & Staff/Client Ratios in Large Residential Agencies Surveyed by ACMRDD, 1983-84. . . 30

TABLES AND CHARTS (Continued)

TABLE 10--All Agencies Surveyed by ACMRDD, 1983-84 32

TABLE 11--Small Residential Agencies, Compared to Large Residential Agencies Surveyed by ACMRDD, 1983-84 . . 33

TABLE 12--Service Components of 84 Agencies Providing Non-Residential Services 34

TABLE 13--Non-Residential Agencies Surveyed by ACMRDD, 1983-84 36

TABLE 14--Residential Components of Agencies Surveyed by ACMRDD, 1983-84. 38

CHART 6--Percent of Clients in Residential Components Compared to Total Clients, 1983-84. 39

TABLE 15--Clients Served in 186 Agencies Surveyed by ACMRDD, 1983-84. 40

CHART 7--Percent of Clients Served & Median Number of Clients by Agency Type. 42

TABLE 16--Staff Ratios, % Severe/Profound, Age Categories, and Median Number of Years in Operation: 186 Agencies Surveyed by ACMRDD, 1983-84. 43

CHART 8--Median Staff Ratios by Type of Agency, 1983-84 45

CHART 9--Percent Severe/Profound, by Type of Agency, 1983-84. .47

CHART 10--Percentage of Children Served, by Type of Agency, 1983-84. 49

CHART 11--Median Years in Operation, by Type of Agency, 1983-84. 50

TABLE 17--Average Number of Previous Surveys, and Average Number of Applicable Standards, 186 Agencies Surveyed by ACMRDD, 1983-84 51

TABLES AND CHARTS (Continued)

TABLE 18--Percent of Agencies Accredited, On Previous & Current Surveys: 186 Currently Surveyed Agencies. 52

TABLE 19--Rank Order of Agency Types by Percent Accredited, Compared to Previous Surveys, and Applicable "A" Standards. 53

TABLE 20--Critical Standards by Section of ACMRDD Standards, Accredited vs. Non-Accredited Agencies. 56

PART III: SUMMARY OF THE REPORT

CHART 12--1973-74 Surveys Compared to 1983-84 Surveys by ACMRDD: Median Number of Clients. 59

CHART 13--Comparison of Selected Factors for 186 Surveys by ACMRDD, 1983-84 61

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PART I: RATIONALE AND DESIGN OF THE STUDY

INTRODUCTION

This analysis of survey activities of the Accreditation Council for Services for Mentally Retarded and Other Developmentally Disabled Persons (ACMRDD) is designed to provide program administrators and state agency officials with comprehensive descriptive information on 296 surveys conducted by the Council from July, 1980, through December, 1984. Although the ACMRDD now surveys a large number of private agencies, the survey process was most widely used for many years in large public residential facilities. In their January, 1983, survey of 247 public residential facilities throughout the United States, Eyman, Jacobson and Janicki (1985) indicated that 19.0% were ACMRDD accredited. Except for the Federal Government's process of auditing compliance with regulations mandated for programs receiving Federal Medicaid reimbursement, the ACMRDD process no doubt is the most widely used external evaluation process for public residential facilities in the United States.

The ACMRDD, however, does not restrict its surveying activites to large state-operated residential facilities. *More than two-thirds of the agencies surveyed by ACMRDD in 1983-84 were privately-operated residential programs, and public or private day activity, vocational or case management agencies.*

The Report has four Parts. Part I summarizes the ACMRDD survey process, the method of the study, and the agency classification system utilized by the project. Part II presents results of the study in five sections. Section 1 summarizes the 296 surveys during 1980-84 for five types of agencies: large public residential, large private residential, small private residential, public non-residential and private non-residential programs.

Section 2 of Part II provides agency and client characteristics for the 186 agencies currently surveyed (the unduplicated count of agencies most recently surveyed by ACMRDD). Section 3 contains additional analysis for the five types of agencies in terms of number of clients served, number of staff, staff-to-client ratios, severity of disability, age of clients, and median years of agency operation.

Section 4 begins the presentation of more detailed survey results, discussing the impact which previous surveys had on agencies' success with accreditation. Section 5 concludes Part II with the identification of "critical" standards. These are the Category A standards which are utilized in ACMRDD accreditation decisions, and the section enumerates those standards with which large numbers of agencies did not comply.

Part III summarizes the Report, suggests additional research, and presents recommendations to the ACMRDD and to agencies seeking accreditation. Part IV consists of eight appendices which follow the order in which they are discussed in the Report. Appendices #1, #2 and #3 present samples of the ACMRDD application form, the Survey Report, and a copy of the project's data coding sheet. Appendix #4 provides a detailed summary of agency and client characteristics for all 296 surveys conducted from 1980 to 1984. This supplements descriptive information presented in the main text of the Report, in Part II.

The remaining four appendices address ACMRDD's most important Category A standards. Appendix #5 enumerates critical standards for large residential, small residential and non-residential agencies, distinguishing between accredited and non-accredited outcomes. Appendix #6 presents critical standards for all 186 currently surveyed agencies, with the individual standards ranked from highest to lowest in terms of the percentages of all agencies found deficient on each one. Appendix #7 also provides a listing of standards critical to all 186 agencies; however, in this Appendix the standards are presented in the order in which they appear in the ACMRDD Standards. Finally, Appendix #8 indicates 162 Category A standards which were not cited in the Survey Reports of any of the 186 currently surveyed agencies--therefore it was assumed that all agencies were in compliance.

THE ACMRDD ORGANIZATION

The American Association on Mental Deficiency (AAMD) took the lead in organizing residential care standards for nationwide use in 1969, and these standards were embodied in the survey process emanating from the Accreditation Council for Facilities for the Mentally Retarded (ACF/MR), which was then affiliated with the Joint Commission on the Accreditation of Hospitals (JCAH) in Chicago, Illinois. As the name implied, this accrediting organization focused primarily on larger, residential care facilities serving individuals with mental retardation.

The current organization, the Accreditation Council for Services for Mentally Retarded and Other Developmentally Disabled Persons, was formed in 1979 with headquarters in Washington, D.C., independent of its previous affiliation with JCAH. The Council's participating organizations have been:

American Association on Mental Deficiency (since 1969)
American Occupational Therapy Association (1981)
American Psychological Association (1973)
Association for Retarded Citizens of the United States (1969)
Council for Exceptional Children (1969-72; 1981-84)
Epilepsy Foundation of America (1978)

National Association of Private Residential Facilities for the Mentally Retarded (1973)
National Association of Social Workers (1978)
National Society for Children and Adults with Autism (1978)
United Cerebral Palsy Associations (1969)

The representatives of these member organizations meet periodically to make accreditation decisions and to direct general policy. There are a number of other national organizations which are advisory or which were represented in the development of the Standards.

THE STANDARDS

The standards of ACMRDD have undergone a number of changes since the Standards for Residential Facilities for the Mentally Retarded were published in 1971 by ACF/MR. In 1973, the Council published Standards for Community Agencies Serving Persons with Mental Retardation and Other Developmental Disabilities. These two sets of standards--the residential care and the community agency standards--were merged into the basic format which is currently utilized, and the final draft was adopted by the Council on September 20, 1977. Since then, changes adopted by the Council were incorporated into new editions published in 1979, 1980, 1981, 1983 and the current 1984 edition of Standards for Services for Developmentally Disabled Individuals.

Besides incorporation of a number of standards to address a broader range of service components, particularly those provided in private agencies, the Standards as they evolved began to reflect a number of requirements related to the principles of "normalization" (Nirje, 1969; Wolfensberger, 1972). The basic outline of the 1984 document is illustrated in Table 1 below.

Table 1
OUTLINE OF ACMRDD STANDARDS
(1984 EDITION)

SECTION	# OF CATEGORY A STANDARDS	# OF OTHER STANDARDS	TOTAL STANDARDS
SECTION 1: INDIVIDUAL PROGRAM PLANNING & IMPLEMENTATION	281	148	429
SECTION 2: ALTERNATIVE LIVING ARRANGEMENTS	89	112	201
SECTION 3: ACHIEVING & PROTECTING RIGHTS	91	73	164
SECTION 4: INDIVIDUAL PROGRAM SUPPORT	240	260	500

Table 1 (Continued)

SECTION	# OF CATEGORY A STANDARDS	# OF OTHER STANDARDS	TOTAL STANDARDS
SECTION 5: SAFETY AND SANITATION	53	12	65
SECTION 6: RESEARCH AND RESEARCH UTILIZATION	22	13	35
SECTION 7: THE AGENCY IN THE SERVICE DELIVERY SYSTEM	18	66	84
TOTAL NUMBER OF STANDARDS	794	684	1,478

There are 1,478 standards. Of these, 794 (54%) are Category A standards. An asterisk in the Standards book identifies each of these "most important" standards which are utilized by the Council in making the accreditation decision. An ACMRDD survey generates a report which denotes the total number of "A" standards with which the agency was found to be in less than full compliance. A calculation is performed in which the total of non-compliance Category A standards is divided by the total of applicable Category A standards. In that calculation, if the result does not exceed 15%, the agency is eligible to be accredited.

However, there may be an exception to this rule. It is possible for an agency to have 85% or slightly better compliance with Category A standards, and yet still not receive accreditation. The Council in fact employs a two-step process, in which the Accreditation Committee reviews the 15% requirement and the accreditation requirements (c.f. page xvii of the Standards). With this safeguard, an agency which, for example, might be technically sophisticated in the implementation of certain training or behavior control programs, but which still evidences a generally negative approach overall in the implementation of training programs would not be accredited.

In the calculation of the percentage of Category A standards with which the agency is in compliance, the Council reviews the number of program components offered by the agency in order to determine the number of "applicable" category A standards. For example, Standard Area 3.2.2 is within Section 3: Achieving and Protecting Rights. In this area, there are twelve "A" standards applicable to Personal Advocacy agencies, and a separate four "A" standards applicable only to agencies which do not provide Personal Advocacy. Although only certain agencies surveyed by ACMRDD will be providing Personal Advocacy services, if an agency is not providing this service there are four "A" standards covering the general requirements all agencies must meet.

A total of 618 (78%) of the "A" Standards are potentially applicable to all agencies, _if_ they provide all basic service components. However, a number of agencies--particularly some smaller private agencies--might have a lower percentage of applicable standards. Applicability of Category A Standards in Section 1 (Individual Program Planning and Implementation) is a prerequisite to ACMRDD accreditation. If an agency does not offer a sufficient range of individual assessment and program planning components, then it may be determined ineligible for accreditation. Table 2 indicates the seven major sections in the ACMRDD standards, and the widely varying number of "A" Standards applicable to all agencies.

Table 2
ACMRDD "A" STANDARDS BY MAJOR SECTION AND PERCENT
APPLICABLE TO ALL AGENCIES (1984 Edition of _Standards_)

MAJOR SECTION	# APPLICABLE ALL AGENCIES	% APPLICABLE ALL AGENCIES
1. Individual Program Planning & Implementation	245	87%
2. Alternative Living Arrangements	1	1%
3. Achieving & Protecting Rights	70	77%
4. Individual Program Support	234	98%
5. Safety & Sanitation	53	100%
6. Research & Research Utilization	1	5%
7. The Agency in the Service Delivery System	14	78%
TOTAL	618	78%

The ACMRDD Standards contain major sections which have been adapted to the variety of service components offered by different types of agencies. For example, Alternative Living Arrangements and Research & Research Utilization are sections in which nearly all Category A standards are applied only to agencies offering these types of services. In the sections Individual Program Support and Safety and Sanitation there is more universal application of the Category A standards. By comparison, The _Standards for Residential Facilities for the Mentally Retarded_ (JCAH, 1974) contained 651 Category A standards, and there was a smaller number of sections (five "major topical requirements") and sub-sections (24 "minor topical requirements").

THE ACMRDD ACCREDITATION PROCESS

Application for Survey

The first stage in the process leading to an accreditation decision by ACMRDD is the submission of an Application for Accreditation Survey (A.A.S.). A copy of the A.A.S. form is included in this Report as Appendix #1. The A.A.S. collects basic information about the characteristics of the agency (ownership, year of initial operation and of current control, over-all staff numbers) and characteristics of clients, including numbers of males and females, age groups, level of mental retardation, and the number of clients served who have additional physical disabilities.

The agency submits the A.A.S. to ACMRDD, along with the necessary fee for the cost of survey (related to the size of the agency). When the application is considered complete by ACMRDD, the agency then must complete a "self-survey." This consists of a copy of the Standards, completed by the agency to indicate its compliance with the individual standards. The Category A standards as printed in the document are preceded by a line on which the agency enters the following code: "1" for full compliance; "2" for partial compliance; "3" for noncompliance; and "4" to indicate the standard does not apply to the agency. This self-assessment is used by the surveyors during the on-site survey, and can be used by the agency in internal program evaluaton.

The agency also must submit a "Survey Questionnaire," providing further information related to compliance with standards. This Questionnaire, for example, requires that the agency explain each response to standards where a code of "2" (partial compliance) or "4" (inapplicability) was indicated. The Survey Questionnaire also contains a detailed description of the survey process.

The On-Site Survey

The survey is scheduled several weeks prior to the visit by ACMRDD surveyors. Upon arrival at the survey site, the surveyors review the survey procedures with the agency's staff and provide any information or clarification needed to assure an understanding of the survey process. Surveyors concentrate on observing the daily implementation of those standards that pertain most directly to the delivery of services to individuals. They assess compliance with these standards by conducting a "program audit" of each individual within a sample selected to represent all individuals served by the agency. Half of the sample may be selected by the agency, in conformance with assigned criteria, and the remainder are selected by surveyors. Additional individuals are often added to the sample at the discretion of the surveyors.

Each standard with which compliance must be assessed for an individual is applied to each individual within that program audit sample. The surveyors first review the individual records to assess compliance with those standards which address documentation in the record, and those standards which are applied in accordance with a particular individual's needs, abilities and handicaps. The surveyors then observe the individual in program areas, including, for residents, the individual's living unit. They also observe the programming being delivered to the individual, and they talk with and question the staff members who work with the individual, including direct-contact staff and, when possible, the individual and his or her family.

Usually toward the end of the survey, the surveyors consult with selected members of the agency's administrative and professional staff in order to assess compliance with specific standards and to seek answers to questions that remain after the program audits have been completed. The surveyors also conduct a Public Information Interview, which is attended by representatives of consumers and by the general public. [The above disussion paraphrases the more detailed description of the Survey contained on pages xiii-xiv of the Survey Questionnaire.]

Survey Report

The surveyors consolidate their findings and develop a Survey Report. The Survey Report cites the standards with which the agency was determined to be in less than full compliance, and provides a brief summary of the evidence that substantiates the finding (see Appendix #2 for a sample Survey Report). The Accreditation Committee within the Council meets periodically, usually monthly, to review all agency surveys which were recently completed. Utilizing the data provided by the the Survey Reports, in which are documented instances of non-compliance with specific Category A standards, the Committee votes on the final accreditation decision. There are four types of decision: a) accreditation for two years; b) accreditation for one year; c) deferral for one year at which time the agency may re-apply for accreditation; and d) non-accreditation (or "working toward accreditation"). The Council may render decisions which are variations on these basic four types; for example, the agency may receive a one-year accreditation contingent upon correcting a particular staffing, life-safety or other critical problem within a relatively short time period.

The Council's accreditation decision is added to the Survey Report, and this is transmitted to the agency, along with a Certificate of Accreditation if appropriate. Accreditation decisions extend from the last day of the survey for the prescribed one or two-year period. The reader should consult the ACMRDD Standards and the Survey Questionnaire for more detailed information on requirements for ACMRDD survey, description of certain types of abbreviated surveys, information about workshops offered by ACMRDD to help prepare agencies for survey, and other special issues such as the agency appeal process (ACMRDD, 1984a, 1984b).

METHODOLOGY

To undertake a study of this magnitude, it was essential to have an effective on-going relationship with the ACMRDD office. This was particularly important since all data relevant to the project were contained in files at that central location. With the cooperation of the former Director of ACMRDD, Dr. Kenneth Crosby, the current Director, Dr. Mary Cerreto, and staff at the Washington ACMRDD office, procedures were developed for data collection which extended throughout the period of the project.

Confidentiality

Braddock (1975, 1977) had utilized an ACF/MR coding system to assure confidentiality of data related to individual agencies surveyed. ACMRDD also utilized unique code numbers for all agencies surveyed. It was therefore possible to positively identify each survey through the code system on file at ACMRDD. This made it possible, through permission granted to ACMRDD by a surveyed agency, to disaggregate data by state, type of agency, and even by individual agencies.

Collection of Data

In a series of three visits beginning in March, 1984, and concluding in September, 1984, the Project Coordinator travelled to the ACMRDD office in Washington to collect the Application for Accreditation Survey and the Survey Report information. In the first visit, project coding forms were developed to be completed by hand, and then returned to the project's office in Chicago for entry into microcomputers (Appendix #3 is a copy of this form). However, after the first visit it was determined that data entry would be much more efficient and reliable if entered directly into the microcomputer. Thus, on subsequent visits, the Project Coordinator utilized a portable computer, equipped with two 360 kilobyte disk drives, and 640 kilobytes of random access memory (RAM). The software which was utilized for data collection and for preliminary analysis was the Lotus Development Corporation's "1-2-3" which offered the three components of: automated spreadsheet, a basic database management component, and graphics capacity.

The A.A.S. forms provided the basic descriptive information about the agency and the clients served at the time of the survey, while the Survey Reports provided the listing of Category A deficiencies, a record of the Council's accreditation decision, and an indication of the number of previous surveys which the agency had received from ACMRDD. In addition to these two formats, ACMRDD files contained, for each Survey, a single sheet summarizing the number of applicable standards. This information was collected for all surveys.

Information consistently available in the Applications for Accreditation Survey consisted of:

Number of Clients Served
Number of Staff
Number of Years in Operation
Number of clients who were Mentally Retarded, including functional level
Number of clients with additional disabilities (autism, cerebral palsy, limited mobility, seizure disorder, hearing and vision impairment)
Number of Females and Males
Number by Age Category (0-6 years, 6-18 years, 18 years and older)
Number of Previous Surveys

In addition to the types of descriptive data available from the A.A.S. listed above, the Survey Reports included surveyors' descriptions of agency service components.

Verification of Data

The data from A.A.S. forms related to client characteristics were reported by the agency on a matrix which had to add horizontally and vertically. Where there were discrepancies on the table, it was possible to check with ACMRDD staff, with the Survey Report, or with information from previous or from subsequent surveys to ascertain the correct figures.

Information about the number of staff was probably the least reliable data item. This was because staff numbers were reported for individual service components and often in part-time equivalents. There were also approximately ten agencies for which no staff numbers were reported. In these instances, we used estimates from other A.A.S. forms for the same agency.

Data from the Survey Reports were highly reliable. The Project Coordinator, utilizing the automated spreadsheet format on the project's microcomputer, entered a "1" for each "A" standard (denoted by an asterisk) listed by surveyors as being in less than full compliance. Then, while the microcomputer was calculating the total number of standards in less than full compliance (which took several seconds), these "A" deficiences also were hand-counted, and the total was written down. As the microcomputer finished calculating, the two totals were compared. If there was a discrepancy, all entries on the spreadsheet were compared again to the Survey Report until the error(s) was found.

Information on service components and numbers of previous surveys were also found on the Survey Reports. In earlier years, the number of previous surveys was presented narratively by the surveyors in their brief description of the agency. For recent reports, ACMRDD adopted a section for entry of the number of previous surveys. Since descriptions of previous surveys were available from multiple survey reports for most agencies, it was possible to cross-check these figures.

Analytic Procedure

When all data had been collected, agency/client descriptive information was sorted into five classification categories (large public residential; large private residential; small private residential; and, public and private non-residential). Further distinction was made between accredited and non-accredited agencies. Then, the spreadsheet data files itemizing each agency's compliance with the applicable number of Category A standards were also sorted by type of agency, and by type of accreditation decision.

The project adopted two categories of accreditation decision: accredited (2 or 1-year accreditation) and not accredited (deferred or not accredited) across the agency types. A four-way decision categorization would have doubled the number of classifications, making resulting categories too small for meaningful analysis.

Determination of Critical Standards. Braddock (1975,1977) had adopted a method for identifying "critical" Category A standards, by expressing noncompliance on a standard in terms of the percentage of agencies which were found to be in less than full compliance with each standard. He used a 40% criterion level to identify the most critical standards affecting agencies surveyed. This Project also adopted the 40% criterion, and this analysis was applied to each major category of agency (large residential, small residential and non-residential), with further distinction between accredited and non-accredited agencies within the category. Detailed information on critical standards is presented in Section 5 of Part II: Results and in Appendix #5 and #6.

Developing a Classification System. When Braddock reviewed 48 ACF/MR surveys conducted in 1973-74, 45 of the agencies (93%) were publicly-operated large residential facilities. Three private agencies were also providing residential programs. However, when the current Project began analysis of the agencies surveyed from 1980 to 1984, it became readily apparent that there was now much more variety in the agencies surveyed by ACMRDD. It was therefore necessary to develop a more detailed classification system to categorize agencies surveyed. To do this, the project considered several factors.

Current research which was reviewed in developing the project's classification system included the various publications of the Center for Residential and Community Services (CRCS) at the University of Minnesota (Hauber, Bruininks, Hill, Lakin, Scheerenberger, & White, 1984; Rotegard, Bruininks, & Krantz, 1984). The classification utilized by CRCS distinguished between public and private residential facilities, and further distinguished between programs which were fifteen beds or less, and those which were sixteen beds or larger. Scheerenberger (1974, 1976a, 1976b, 1978, 1979, 1982, 1983) conducted periodic surveys of large public residential facilities, and Epple, Jacobson and Janicki (1985) conducted a January, 1983, survey of public residential facilities which focused on 247 facilities. Braddock, Hemp and Howes (1984, 1985, in press-a, in press-b) presented expenditure data comparing institutional spending to community spending, utilizing a definition of MR/DD institutions which was consistent with CRCS and Scheerenberger.

A number of agencies surveyed by ACMRDD provided residential services in units of fifteen beds or smaller (group homes, supported living arrangements, foster care, etc.). The Federal ICF/MR regulations applied to many of these residential programs, and they distinguished facilities of fifteen beds or less. Such facilities were required to meet only the residential occupancy life-safety code standards, and sixteen bed or larger facilities which had to meet institutional occupancy life-safety code (NFPA, 1983). Thus, it was important to be consistent with the CRCS and ICF/MR distinction between 15 or less or 16 or more in facility size, and with other relevant literature.

ACMRDD Descriptive Data. A major factor in classification of agencies was the availability of data on which classifications could be based. For example, data were not available in the ACMRDD survey applications on annual budgets of agencies. Therefore, such an element could not be utilized in classification. Data items which were consistently available in the application information included: agency size as measured by total staff, and the number of total clients served by the agency; ownership (governmental, private not-for-profit and private proprietary); length of time in operation; primary focus (the types of service components offered); and the number of sites, number of clients, and residents per site in residential components operated by the agency.

Table 3 below outlines the classification adopted by the project for categorization of the agencies surveyed by ACMRDD from July, 1980, through December, 1984.

Table 3
CLASSIFICATION OF AGENCIES SURVEYED BY ACMRDD, 1980-84:
NUMBER AND PERCENTAGE, BY TYPE OF AGENCY

	Previous Survey 1980-82	Current Survey 1983-84	Total Surveyed 1980-84
LARGE RESIDENTIAL: The majority of individuals served reside in residential sites of 16 beds and larger which are operated by the agency	46	74	120
Public--Operated by state, county, municipal government	39 (35%)*	60 (32%)	99 (34%)
Private--Operated by not-for-profit or for-profit agency	7 (6%)	14 (8%)	21 (7%)
SMALL RESIDENTIAL: The majority of individuals served reside in residential sites of 15 beds or less which are operated by the agency	13	28	41
Public	0	0	0
Private	13 (12%)	28 (15%)	41 (14%)
PRIMARILY NON-RESIDENTIAL: The majority of individuals served do not reside in residential sites operated by the agency	51	84	135
Public	3 (3%)	10 (5%)	13 (4%)
Private	48 (44%)	74 (40%)	122 (41%)
TOTAL, ALL TYPES OF AGENCIES	110	186	296

*Column percentages; percent within Previous Survey, Current Survey, and Total Surveyed, respectively.

The project classified agencies in terms of the basic focus, or predominant type of major service component, and further denoted public and private ownership. It should be noted that an agency might not serve a "majority" of clients in any one of the three categories indicated above. In other words, it might offer small residential, large residential and non-residential service components to equal numbers of individuals. Such an agency would be designated "residential" if a majority of individuals were served in both residential components combined, and further denoted "small" or "large" residential depending on which of these two components served the largest number of individuals. Otherwise, agencies with all three major service components were designated "non-residential."

Since 1980, when ACMRDD was established in Washington, through December, 1984, there were 296 surveys. This number, however, included a significant number of agencies which had two or more surveys, and also eight agencies in four states which dropped out of the survey process. The table therefore indicates "Current Survey 1983-84," an unduplicated count of agencies which received accreditation decisions extending through December, 1984, and those agencies awaiting an accreditation decision as of December, 1984. Section 2 of Part II, "Characteristics of Currently Surveyed Agencies, 1983-84" will focus on this group of agencies.

Some agencies defined in the "Current Survey 1983-84" group were actually surveyed in 1982 or even in 1981. For example, some agencies were surveyed late in 1981, and received two-year accreditation extending their scheduled re-survey dates into late 1983. Due to ACMRDD's expanding schedule of surveys, the next surveys for these agencies may not have occurred in 1984, and accreditation decisions were thus extended by ACMRDD through December, 1984.

Seventy-four of the currently surveyed agencies (40%) provided primarily large residential service (fifty percent or more of the individuals served by the agency were served in residential sites of sixteen beds or more). The second major category consisted of 28 privately-operated agencies which primarily provided residential care in sites of fifteen beds or less. They constituted 15% of the agencies surveyed in 1983-84. The ACMRDD database through December, 1984, included no public agencies providing these small residential services.

The third major category consisted of agencies in which fifty percent or more of the individuals served resided in residential sites which were not operated by the agency. The principal components offered were workshops, day training programs, special schools, case management and other non-residential services. The majority of individuals served resided in the family home, in independent living, or in residential programs operated by other agencies. Eighty-four agencies (45%) were in this "primarily non-residential" category.

Analysis of Agency and Client Characteristics. ACMRDD survey data describing the quality of a variety of service models with a consistent set of standards provided a unique perspective on the developmental disabilities service system. With the exception of the recent national studies of residential services conducted at the University of Minnesota (e.g., Hauber et al., 1984), analyses employing standardized evaluations across multiple regions and service models were not generally available in the literature.

The analytic intent of this Report is descriptive and exploratory. Data on selected agency characteristics (e.g. staffing, major focus of service, and client composition) are summarized and broken down across survey outcomes (accreditation or non-accreditation), the taxonomy of agencies (five types), and agencies' performance on major sections of the ACMRDD survey standards. While the summaries presented in the main body of the Report are extensive, they are only a subset of a larger array of variables assessed in this study. Readers interested in greater detail on client characteristics are referred to Appendix #4. There, twenty client classifications (e.g. age groups and specific disabilities) are summarized in tabular form broken down across agency types and accreditation decision. In addition, data from the earlier 1980-82 survey period are provided in detail for comparison with data from 1983-84.

There are a total of five tables within Appendix #4. They include data for the five categories of agency (large public residential, large private residential, small private residential, public non-residential and private non-residential). For each of these five categories, data are presented for the two survey groups: "Current Surveys" (1983-84) and "Previous Surveys" (1980-82). Descriptive statistics utilized in Appendix #4 include the mean, median, standard deviation ("Std Dev"), minimum value ("Min Val") and maximum value ("Max Val").

Limitations of the Analysis

Within this Report, there are various tabular summaries of client characteristics (e.g. degree of disability) and other agency characteristics such as average number of previous ACMRDD surveys in relationship to survey outcome. The reader must realize that these data are descriptive of the current "population" of surveyed agencies only, and inferences to a larger group of, say, potentially surveyed agencies are not justified based on the present analysis.

The appropriateness of significance tests where the entire population constitutes the sample under analysis is a matter of debate. Had our intent been to make statements about the causal processes that generated the observations which are made in the Report, then the role of statistical testing is clear. The analytic focus would be on evaluating whether or not the pattern of observations were due to chance or were generated by systematic causal processes operating among the subpopulations. Since the intent of the report is descriptive rather than interpretive, the role of statistical analysis was downplayed. The ACMRDD database is simply not extensive enough for such lines of inquiry.

Data on many important variables were not available for analysis. For example, we have observed that accredited agencies have smaller proportions of severely and profoundly handicapped residents. If a test of this difference yielded a statistically significant effect could we attribute accreditation to such proportions? The statistical test of this difference cannot rule out other alternative explanations (a major problem with intact groups). This was our concern: to emphasize statistical analyses on a limited database we would have risked obscuring valid and interesting observations with what may have been simplistic or distorted causal attributions (what statisticians refer to as "errors of specification"). In short, we believe causal attributions are premature given the limitations of the database at this time.

PART II: RESULTS

OUTLINE OF RESULTS SECTIONS

The RESULTS which follow are organized into five sections.

Section 1: Overview of ACMRDD Surveys, 1980-84. The Section provides an overview of survey activity since ACMRDD was established in Washington in 1980. Survey activity by state and by type of agency is presented, as well as a breakdown of survey outcomes (accreditation vs. non-accreditation) for the total of 296 surveys.

Section 2: Characteristics of Currently Surveyed Agencies. This Section presents in more detail information related to the "unduplicated count" of 186 agencies which were surveyed by ACMRDD through December, 1984. Summary data are presented on agency characteristics and client characteristics for the five types of agencies defined in Table 3 above. Characteristics are summarized by agency type for accredited vs. non-accredited agencies.

Section 3: Additional Analysis of Agency Characteristics. The five types of agencies surveyed in 1983-84 are compared to one another along basic descriptive dimensions (number of clients, number of staff, staff/client ratios, etc.).

Section 4: Impact of Previous Surveys. Information on the 186 agencies surveyed in 1983-84 is provided on the average number of previous surveys and the average number of applicable "A" standards related to accreditation outcome.

Section 5: Critical Standards. Standards were identified with which 40% of the agencies within each of the major categories (large residential, small residential, non-residential) were found to be in less than full compliance. Critical Standards also were identified for all 186 currently surveyed agencies. Finally, 162 Category "A" Standards with which all of the 186 agencies were assumed to be in compliance were identified.

SECTION 1: OVERVIEW OF ACMRDD SURVEYS, 1980-84

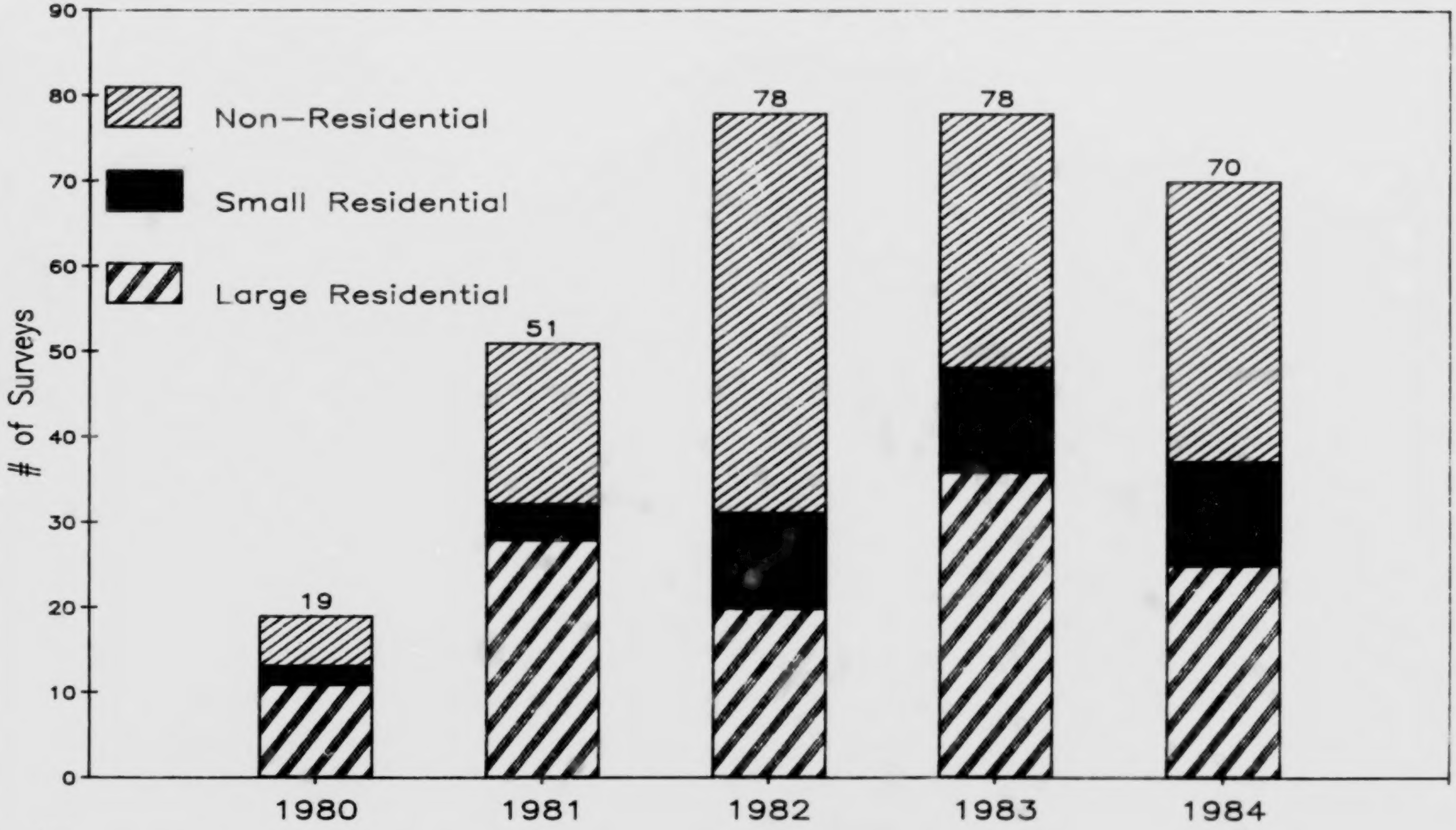
Between July, 1980, and December, 1984, ACMRDD completed 296 surveys resulting in accreditation decisions. Chart 1 below indicates the types of agencies reviewed from 1980 through 1984. Please note that the chart includes re-surveys. There were relatively few surveys in the first year, after the Accreditation Council for Facilities for the Mentally Retarded was re-established as ACMRDD in Washington. In that first year--1980--nearly 60% of the agencies surveyed were "large residential" programs. (In 1973-74, large publicly-operated agencies constituted 93% of the sample of ACMRDD-surveyed agencies reviewed by Braddock).

The "non-residential" and "small residential" categories of agencies were surveyed with much more frequency in 1981 and 1982. In 1982, the Maryland State Planning Council on Developmental Disabilities collaborated with the state Mental Retardation and Developmental Disabilities Administration (MRDDA) to initiate a two-year pilot project in which forty-two private provider agencies were surveyed by ACMRDD (Maryland State Planning Council, 1985). The number of surveys of agencies providing small residential and non-residential services increased significantly in South Dakota and Tennessee as well. As can be seen on the chart, the surveys of large residential agencies were generally in a two-year cycle; although there was an increasing number of such agencies surveyed each year, most of the survey numbers related directly to the lapsing of two-year accreditation, necessitating re-survey. Table 4 below provides additional detail on the annual surveys, by type of agency.

Table 4
ANNUAL ACMRDD SURVEYS, BY TYPE OF AGENCY

TYPE OF AGENCY	1980	1981	1982	1983	1984	TOTAL
Large Public Residential	10	24	15	31	19	99
Large Private Residential	1	4	5	5	6	21
Small Private Residential	2	4	11	12	12	41
Public Non-Residential		2	2	4	5	13
Private Non-Residential	6	17	45	26	28	122
TOTAL	19	51	78	78	70	296

CHART 1



ACMRDD Surveys; 1980–84,
By Type of Agency
(Note: Includes Resurveys)

Source: Evaluation & Public Policy Program, ISDD, U of IL at Chgo, 1985.

Accreditation Decisions Since 1980

Chart 2 below indicates the degree to which the different types of agencies were successful in receiving positive accreditation decisions following their survey (two-year or one-year accreditation). Slightly more than three-fourths of all surveys resulted in either two-year or one-year accreditation. Public agencies over the five-year period seemed to perform slightly better than did private agencies. The lowest percentage of accreditation success for the 1980-84 surveys is more than twice as high as the accreditation performance of the sample of 48 agencies surveyed ten years earlier in 1973-74. Only 13 of 48, or 27%, were accredited at that time (Braddock, 1975, 1977).

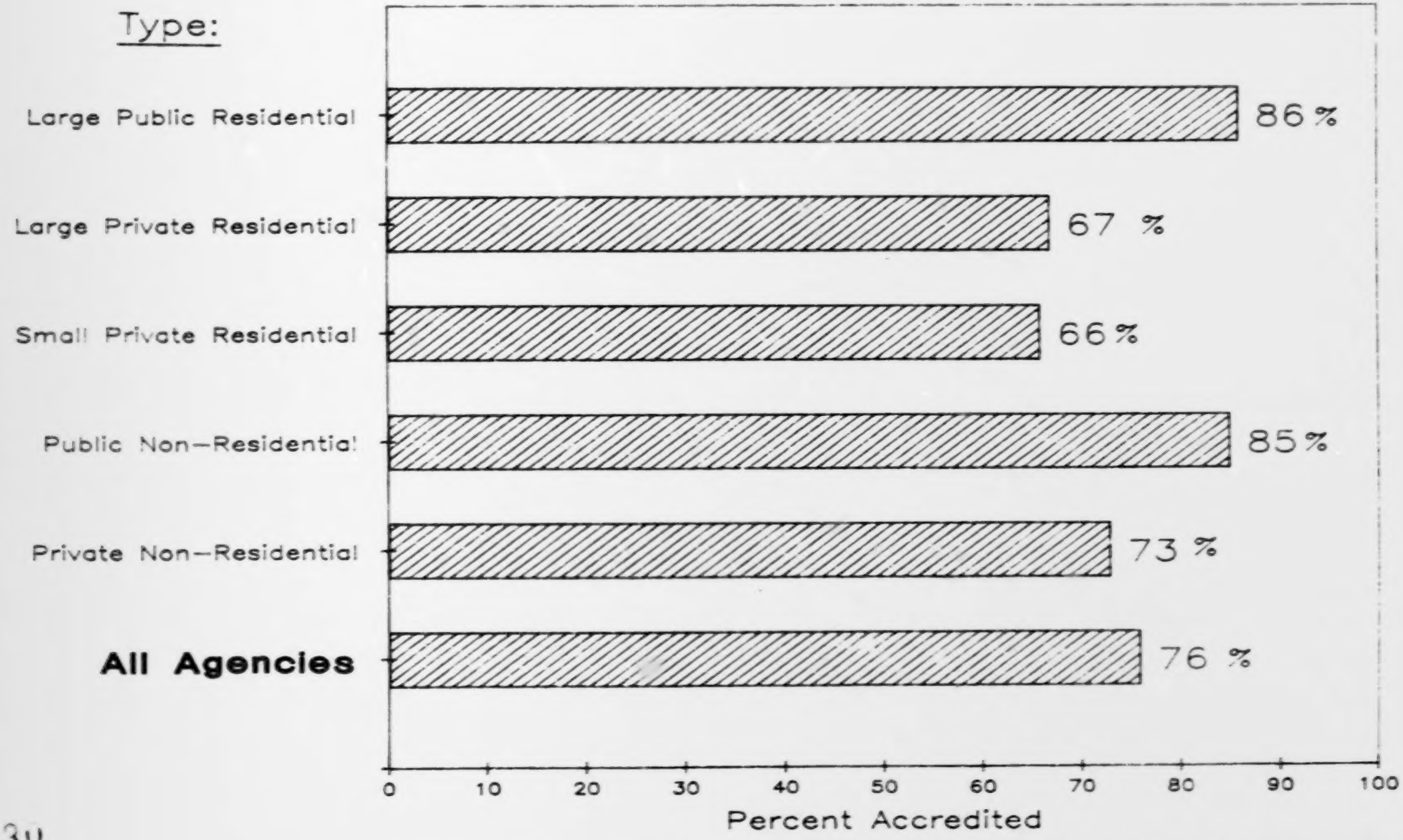
It should be noted that this overview of all surveys from 1980-84, which includes a number of re-surveys for many agencies, should not be construed to suggest that, for example, large public residential agencies are in general more successfull with ACMRDD surveys than are other types of agencies. As will be discussed later in this Report, the effect of previous survey experience on survey outcome is apparently a factor which may be more important than characteristics related to the "type" of agency defined by this Project. Other factors which could not be determined by data available to the Project may also have affected survey outcome. For example, we were not able to determine staff salary levels, education levels of staff, management style, or a number of other factors which could conceivably play a role in accreditation outcome.

Table 5 below provides addtional detail on the accreditation decisions from 1980-84, indicating the year of survey, type of agency, and decision.

CHART 2

Percentage of Surveys Resulting in Accreditation, By Type of Agency: 1980–84

(296 Surveys–Includes Resurveys)



Source: Evaluation & Public Policy Program, ISDD, U of IL at Chicago, 1985.

Table 5
ANNUAL ACCREDITATION DECISIONS FOR ACMRDD SURVEYED AGENCIES, BY TYPE OF AGENCY (INCLUDES RE-SURVEYS)

TYPE OF AGENCY	2-YR ACC.	1-YR ACC.	DEFERRED	NOT ACC.
SURVEYS IN 1980				
Large Public Residential	7	3		
Large Private Residential	1			
Small Private Residential	2			
Public Non-Residential				
Private Non-Residential	6			
	16	3		
SURVEYS IN 1981				
Large Public Residential	16	8		
Large Private Residential	2		2	
Small Private Residential	2	2		
Public Non-Residential	1	1		
Private Non-Residential	14	3		
	35	14	2	
SURVEYS IN 1982				
Large Public Residential	10	3	2	
Large Private Residential	2	2	1	
Small Private Residential	3	1	1	6
Public Non-Residential	2			
Private Non-Residential	18	4	5	18
	35	10	9	24
SURVEYS IN 1983				
Large Public Residential	25	1	3	2
Large Private Residential	3		1	1
Small Private Residential	10		2	
Public Non-Residential	3		1	
Private Non-Residential	21	1	2	2
	62	2	9	5
SURVEYS IN 1984				
Large Public Residential	12		5	2
Large Private Residential	3	1	2	
Small Private Residential	7		4	1
Public Non-Residential	3	1	1	
Private Non-Residential	22		3	3
	47	2	15	6
ALL SURVEYS (1980-84)				
Large Public Residential	70	15	10	4
Large Private Residential	11	3	6	1
Small Private Residential	24	3	7	7
Public Non-Residential	9	2	2	
Private Non-Residential	81	8	10	23
GRAND TOTAL, 1980-84	195	31	35	35

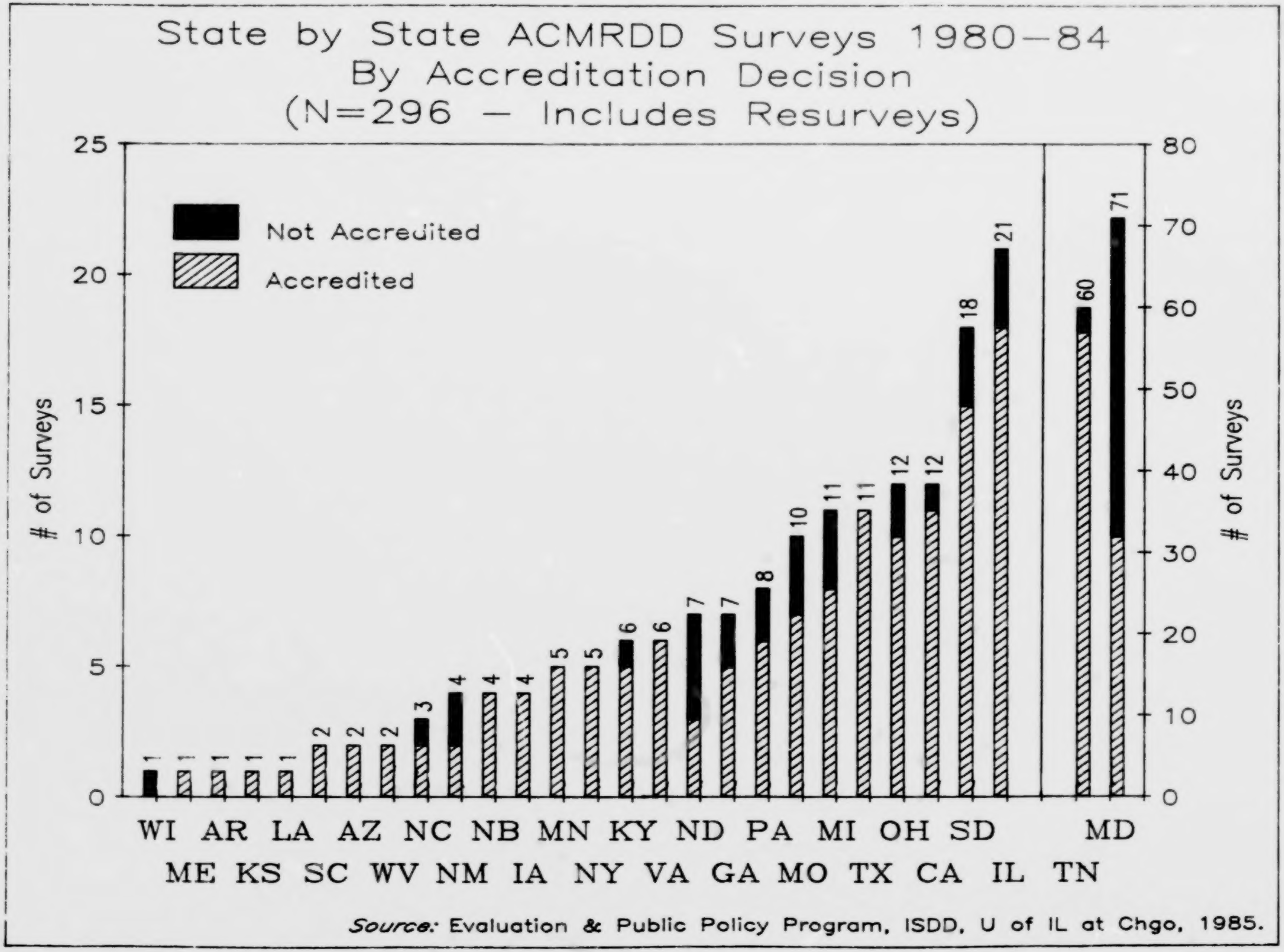
Table 5 demonstrates that, as the number of surveys of small private residential agencies and of public and private non-residential agencies expanded, there were also increases in the numbers of "deferred" and "not accredited" outcomes. Over the five-year period, two-year accreditation made up 66% of survey outcomes; one-year accreditation accounted for 10%, and deferred and non-accredited decisions each accounted for 12% of the 296 survey results.

Surveys by State

Chart 3 below indicates the pattern of 1980-84 surveys, by state. Note that the two states to the right on the chart (Tennessee and Maryland), because of their large number of surveys, were charted against the axis to the right, which is scaled from 0 to 80.

The chart indicates the relative emphasis the various states placed on the ACMRDD process. The large number of non-accredited agencies in Maryland reflected the fact that, from 1980-84, many private agencies underwent initial surveys. As will be discussed in more detail below in Section 4 (Impact of Previous Surveys), this low percentage of accredited agencies probabably does not reflect as much on the overall quality of Maryland's agencies, but rather on the difficulty which many agencies appeared to have in meeting ACMRDD requirements during initial surveys.

CHART 3



Source: Evaluation & Public Policy Program, ISDD, U of IL at Chgo, 1985.

Table 6 below provides additional detail on the state-by-state ACMRDD surveys, comparing the previous group of surveys (1980-82) to the agencies surveyed in 1983-84. Maryland, which initiated a pilot project to utilize ACMRDD surveys in lieu of state agency or other evaluations, had by far the largest number of agencies surveyed with 71. The vast majority of these were private agencies operating small residential or non-residential types of services. Tennessee had a total of 60 surveys, eleven of which were large public residential agencies, and the remainder were private small residential, large residential and non-residential programs. Next was Illinois, which had twenty-one surveys of large public residential facilities. South Dakota had eighteen surveys of public and private non-residential agencies. Note that the "83-84" group of surveys indicated in Table 6 are the "currently surveyed" agencies described below in Section 2. Additional detail on agency and client characteristics comparing 1980-82 surveys to 1983-84 surveys is located in Appendix #4.

Table 6
STATE-BY-STATE ACMRDD SURVEYS, 1980-82 SURVEYS COMPARED TO 1983-84 SURVEYS

State Name	Large Public Res		Large Private Res		Small Private Res		Public Non-Res		Private Non-Res		TOTAL	
	80-82	83-84	80-82	83-84	80-82	83-84	80-82	83-84	80-82	83-84	80-82	83-84
AZ		2									0	2
AR		1									0	1
CA	4	8									4	8
GA	3	4									3	4
IL	9	12									9	12
IA					1	2				1	1	3
KS									1		1	0
KY			1	5							1	5
LA		1									0	1
ME									1		1	0
MD	1	2		2	7	11			14	34	22	49
MI	4	6						1			4	7
MN	2	3									2	3
MO		2	1	1			1	2	1	2	3	7
NB				1			1	2			1	3
NM		1							1	2	1	3
NY	2	1			1	1					3	2
NC	1	2									1	2
ND				1		2		3		1	0	7
OH	2	3	2	2				1	1	1	5	7
PA	2	2	2	2							4	4
SC							1	1			1	1
SD					2	8			3	5	5	13
TN	6	5			2	4			18	25	26	34
TX	1	1							7	2	8	3
VA	2	4									2	4
WV									1	1	1	1
WI			1								1	0
Totals	39	60	7	14	13	28	3	10	48	74	110	186

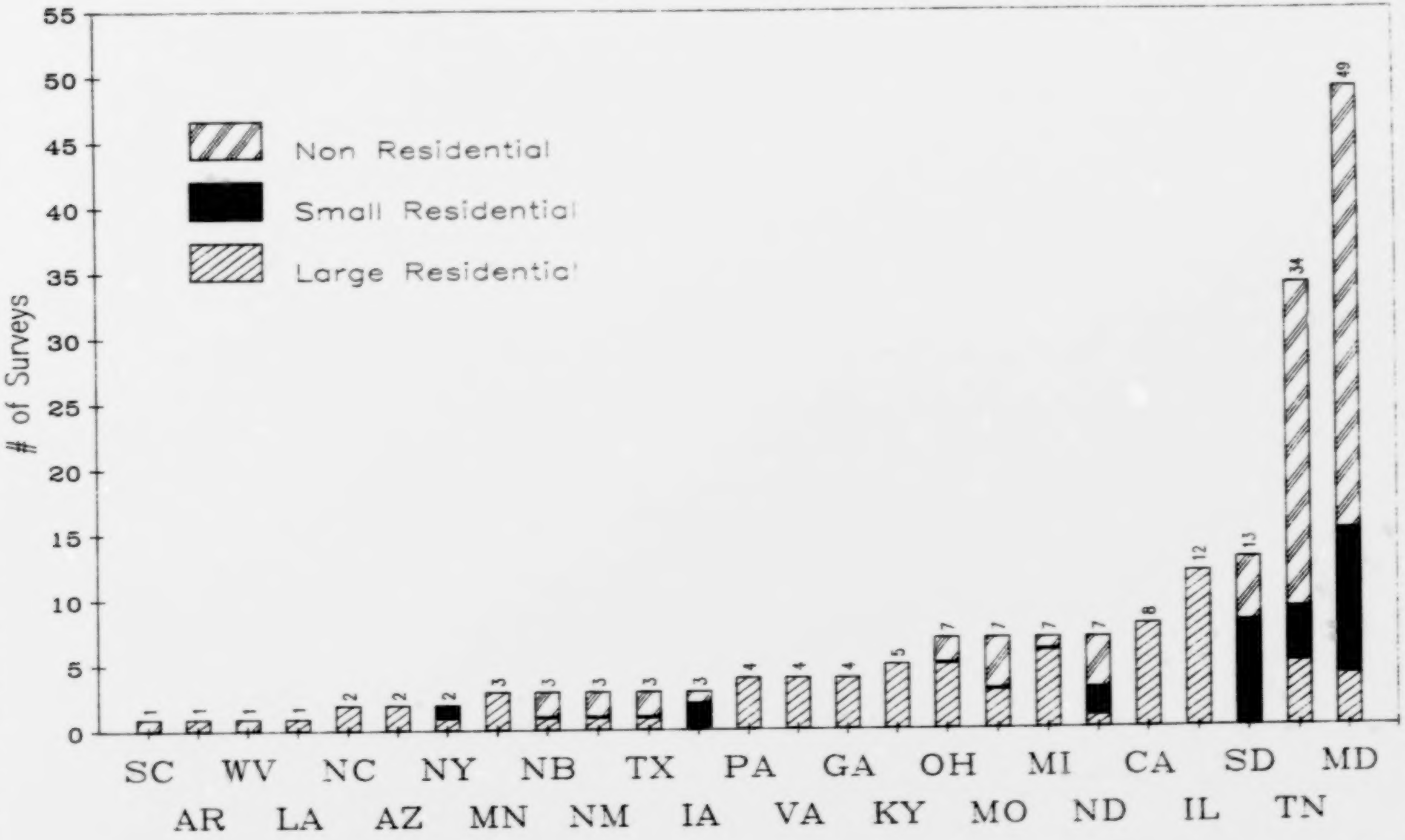
SECTION 2: CHARACTERISTICS OF CURRENTLY SURVEYED AGENCIES

In this section, the subset of agencies surveyed in 1983-84 will be considered. These "currently surveyed" agencies were those which had received a decision from ACMRDD extending through December, 1984, or which had been surveyed and were awaiting a decision as of December, 1984. Besides the exclusion of multiple surveys of the same agency, this group of agencies excludes those which were surveyed at some point between 1980-84, but which did not continue to seek accreditation at the time a subsequent survey was due. There were eight agencies in four states which, for a variety of reasons, did not continue to seek ACMRDD accreditation.

The discussion which follows in Section 2 will review the five types of ACMRDD surveyed agencies (large public residential, large private residential, small private residential, public non-residential and private non-residential). Chart 4 below indicates the state-by-state pattern for agencies surveyed by ACMRDD in 1983-84 denoted by the three major categories of agencies: large residential, small residential and non-residential. As the chart indicates, the four states (Maryland, Tennessee, South Dakota and Illinois) are the leaders, as they were in total number of surveys, during 1980-84.

CHART 4

Agencies Currently Surveyed By ACMRDD (1983–84), By State and Type of Agency (N=186)



Source: Evaluation & Public Policy Program, ISDD, U of IL at Chgo, 1985.

Large Residential Agencies

This was the category of agency which was the initial focus of the ACF/MR accreditation process in 1973-74, when Braddock looked at a sample of 48 agencies (63% of the 76 accreditation decisions made on residential facilities by ACF/MR as of May, 1975). He indicated that 93% of the sample of surveyed agencies consisted of large, state-operated facilities. Table 7 summarizes the characteristics of these 48 agencies, compared to the 74 large public residential agencies in the 1983-84 sample.

Table 7
CHARACTERISTICS OF LARGE RESIDENTIAL AGENCIES SURVEYED
BY ACF/MR IN 1973-74, COMPARED TO ACMRDD SURVEYS, 1983-84

	1973-74			1983-84		
CHARACTERISTIC	PUBLIC	PRIVATE	ALL	PUBLIC	PRIVATE	ALL
Number of Agencies	45	3	48	60	14	74
Percent Accredited	27%	33%	27%	78%	64%	76%
Clients Served				28,657	1,807	30,464
Median Clients: Accredited			92	343	87	282
Median Clients: Not Accred.			638	403	76	271
Median Clients: All Agencies			396	380	80	282

There were significant differences between the large residential agencies surveyed a decade ago, and those surveyed in 1983-84. Nineteen percent of the large residential agencies were privately operated in 1983-84, compared to only 6% ten years earler. Private agencies in the more recent group of surveyed agencies were also more successful at becoming accredited than was the case in 1973-74: 64% were accredited compared to 33% earlier. However, recent accreditation success was even greater with public residential agencies, which accumulated a 78% accreditation success rate in the 1983-84 group, contrasted to only 27% ten years earlier.

The median sizes of both the accredited and non-accredited private agencies in 1983-84 were significantly less than those of public agencies surveyed in the same time period. And, while the currently surveyed public agencies which were accredited were larger than accredited agencies surveyed earlier, the current survey group had a smaller median number of clients overall than did the survey group in 1973-74.

Braddock had noted the significant difference between median sizes of accredited vs. non-accredited agencies (92 compared to 638) in the sample of 48 surveyed agencies. While the 1983-84 public accredited agencies still had a smaller median size than those which were not accredited (343 compared to 403), the difference was not nearly as great. The largest non-accredited public residential facility was significantly smaller than in 1973-74 (1,053 compared to 2,438), while the largest accredited facility in 1983-84 was more than twice as large as in the earlier sample of 48 large residential programs (1,854 compared to 796).

Another comparison of the large public residential agencies surveyed by ACMRDD in 1983-84 was made to all such facilities nationwide. A national survey of large public residential facilities in 1983 (Epple, Jacobson, & Janicki, 1985) indicated that, in the fifty states and the District of Columbia, there were a total of 247 facilities serving 111,311 residents. Thus, the number of individuals served in 60 public residential facilities surveyed by ACMRDD (28,657) represented 26% of the national public residential facility census. This is 24% of the nation's facilities.

Staff Ratios. Epple et al. (1985) indicated that, with 177,719 staff and 111,311 residents, the nationwide staff to resident ratio in 1983 was 1.60 to 1. By comparison (utilizing the same method--total staff divided by total residents), the staff ratios for large public and private residential agencies was computed for the agencies surveyed by ACMRDD, and is indicated in Table 8. Median staff-to-resident ratios are also provided.

Table 8
STAFF RATIOS IN LARGE RESIDENTIAL AGENCIES
SURVEYED BY ACMRDD, 1983-84

	PUBLIC			PRIVATE		
	ACCRED.	NOT ACCRED.	ALL	ACCRED.	NOT ACCRED.	ALL
Number of Agencies	47	13	60	9	5	14
Total Clients	23,201	5,456	28,657	1,421	386	1,807
Total Staff	30,150	8,987	39,137	2,014	235	2,249
Staff/Resident	1.30	1.65	1.37	1.42	.61	1.25
Median Staff Ratio	1.44	1.71	1.49	1.49	.59	1.31

The staff-to-resident ratio for accredited public agencies (1.30/1) was significantly less than the 1983 figure for the nation's total of 247 public residential facilities (1.60/1) and was also significantly less than that reported for the thirteen non-accredited public agencies (1.65/1). The comparison of accredited and non-accredited ratios for private agencies is certainly closer to what would be expected, in that non-accredited agencies' ratios were less than half those of accredited agencies, and the latter ratio was much closer to the national staff-to-resident ratio of all large public residential facilities. The nine accredited private residential programs had a staff to resident ratio of 1.42/1, constrasted with a ratio of only .61/1 for the five non-accredited private agencies.

Chart 5 illustrates the relative numbers of individuals served, the number of staff, and the average staff/client ratios in public and in private large residential programs surveyed by ACMRDD.

Functional Levels and Age. Table 9 summarizes information about the functional levels of individuals served in public and private large residential programs, and the age categories.

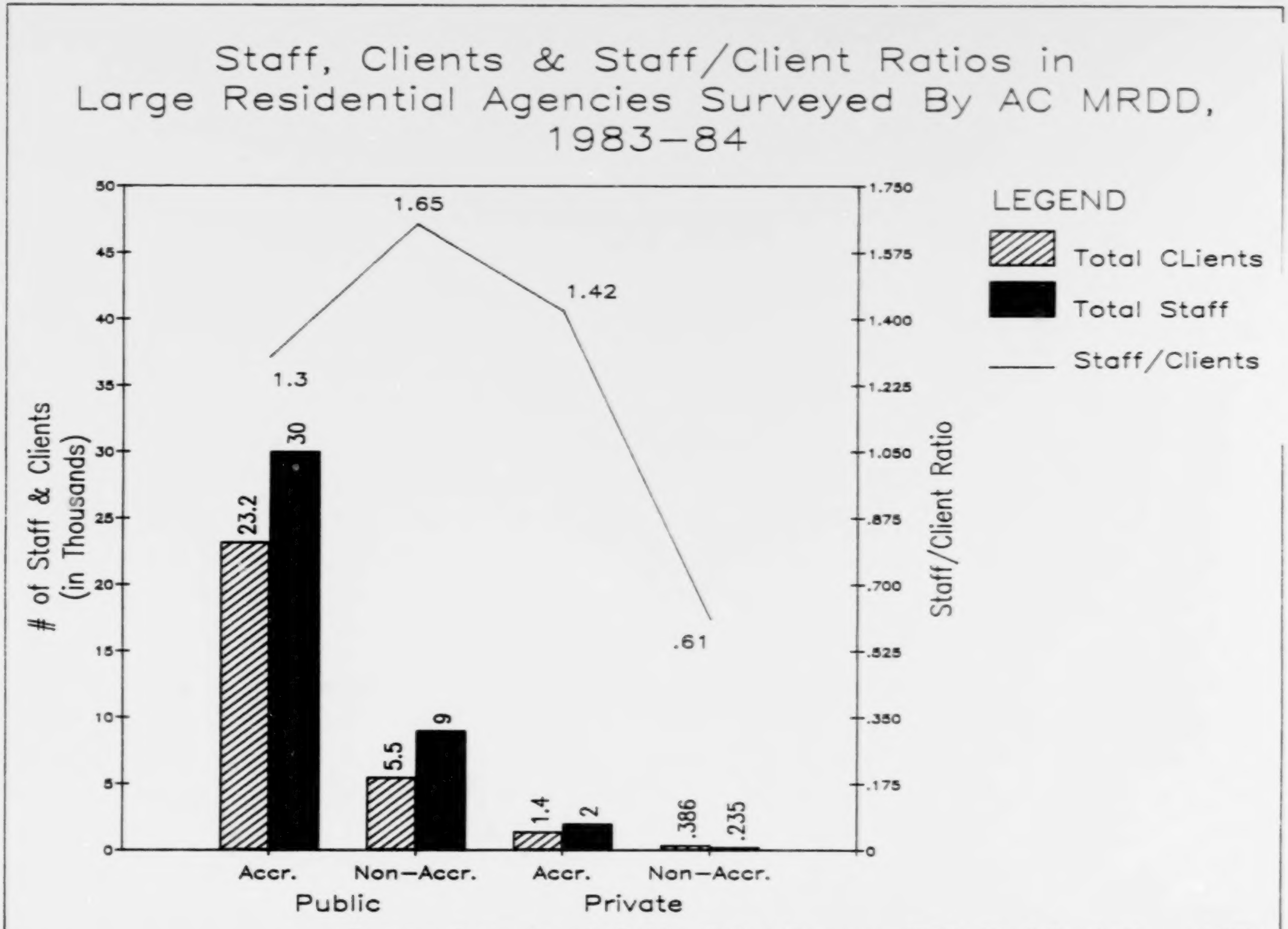
Table 9
SEVERITY OF RETARDATION AND AGE CHARACTERISTICS IN
LARGE PUBLIC & PRIVATE RESIDENTIAL AGENCIES
SURVEYED BY ACMRDD, 1983-84

	PUBLIC			PRIVATE		
	ACCRED.	NOT ACCRED.	ALL	ACCRED.	NOT ACCRED.	ALL
% Sev./Profound*	80%	86%	81%	59%	64%	60%
% Mild/Moderate	20%	14%	19%	41%	36%	40%
% 0-6 Years Old	3%	1%	2%	2%	1%	2%
% 7-17 Years Old	15%	18%	16%	34%	8%	29%
% 18 Years or Older	82%	81%	82%	63%	91%	69%

*Note: Ninety-six percent of large public residential agency residents were mentally retarded; 99% in large private residential agencies.

Non-accredited agencies, both publicly and privately operated, served slightly larger percentages of individuals with severe/profound mental retardation than did their accredited counterparts. Public residential agencies over-all served a larger percentage of individuals with severe/profound disability than did private residential agencies.

CHART 5



Staff, Clients & Staff/Client Ratios in Large Residential Agencies Surveyed By AC MRDD, 1983–84

Source: Evaluation & Public Policy Program, ISDD, U of IL at Chgo, 1985.

The percentages of individuals served by age category for all large residential programs were generally consistent with national data (Hauber, Bruininks, Hill, Lakin, & White, 1982; Lakin, Bruininks, Doth, Hill, & Hauber, 1982), with a significantly higher percentage of older individuals. Of note, however, is the indication that over a third of the individuals served in accredited private residential programs were less than 18 years of age (Table 9).

Proprietary Agencies. All five of the proprietary agencies surveyed by ACMRDD in 1983-84 were in the large private residential category, where they constituted 36% of the fourteen agencies, and 4% of all 116 private agencies surveyed in 1983-84. Three accredited proprietary programs had a median size of 58 (range of 56 to 78). The two non-accredited proprietary agencies served 81 and 179 clients.

All Agencies Surveyed by ACMRDD, 1983-84

Table 10 below summarizes basic characteristics for all 186 agencies surveyed in 1983-1984. As can be noted in the table, the "typical" agency surveyed in 1983-84 was much smaller (median 117 clients) than the large residential agencies which were surveyed in 1973-74 (Table 7). The accreditation rate of the agencies surveyed in 1983-84 was significantly better (70% accredited) than for the 48 agencies surveyed ten years earlier (27% accredited).

Table 10
ALL AGENCIES SURVEYED BY ACMRDD, 1983-84

		ALL AGENCIES	
CHARACTERISTIC	ACCRED.	NOT ACCRED.	TOTAL
Number of Agencies	131	55	186
Percent Accredited	70%	30%	---
Total Clients	38,463	9,732	48,195
Range, Clients	5- 2,159	11- 1,234	5- 2,159
Median Clients	144	74	117
Total Staff	35,747	10,756	46,503
Range, Staff	4- 1,385	5- 1,912	4- 1,912
Median Staff	80	30	56
Staff/Resident Ratio	.93	1.07	.96
Median Staff Ratio	.60	.56	.58
% Sev./Profound*	64%	69%	65%
% Mild/Moderate	36%	30%	35%
% 0-6 Years Old	5%	3%	4%
% 7-17 Years Old	15%	15%	15%
% 18 Years & Older	80%	82%	81%

* Ninety-three percent of all clients in 186 agencies were mentally retarded.

Small Residential Agencies

In the group of 186 ACMRDD currently surveyed agencies, 28 agencies provided small residential services--where the majority of individuals were served in residential sites of fifteen beds or less. All 28 agencies were privately operated by not-for-profit organizations. Table 11 below provides basic information about these agencies. The private agencies' characteristics are compared to the 74 large residential agencies in the table.

Table 11
SMALL RESIDENTIAL AGENCIES, COMPARED TO LARGE RESIDENTIAL AGENCIES SURVEYED BY ACMRDD, 1983-84

	SMALL RESIDENTIAL			LARGE RESIDENTIAL		
CHARACTERISTIC	ACCRED.	NOT ACCRED.	TOTAL	ACCRED.	NOT ACCRED.	TOTAL
Number of Agencies	17	11	28	56	18	74
Percent Accredited	61%	39%	---	76%	24%	---
Total Clients	880	455	1,335	24,622	5,842	30,464
Range, Clients	5-188	11-63	5-188	27-1,854	22-1,053	22-1,854
Median Clients	46	32	42	282	271	282
Total Staff	590	299	889	31,620	9,222	40,842
Range, Staff	5-179	8-42	5-179	7-2,283	13-1,385	7-2,283
Median Staff	24	25	24	388	504	395
Staff/Resident Ratio	.67	.66	.67	1.28	1.58	1.34
Median Staff Ratio	.52	.69	.62	1.46	1.49	1.46
% Sev./Profound*	33%	24%	30%	79%	85%	80%
% Mild/Moderate	67%	76%	70%	21%	15%	20%
% 0-6 Years Old	2%	-0-	1%	3%	0%	3%
% 7-17 Years Old	12%	3%	9%	16%	18%	16%
% 18 Years & Older	86%	97%	90%	81%	82%	81%

* Ninety-four percent of small private residential agencies' total clients were mentally retarded; 96% of the clients in 74 large residential agencies were mentally retarded.

Agencies providing services in small residential settings (sites fifteen beds or less) were generally much smaller over-all (as measured by total staff and total clients served) than were the agencies which provided services in larger residential sites. Staff ratios were significantly smaller for both accredited and non-accredited small private residential agencies. This was consistent with the lower percentage of individuals with severe/profound mental retardation in smaller agencies. However, the staff ratios were comparable to those of non-accredited private agencies providing residential services in primarily large sites (Table 8 above).

Non-Residential Agencies

The largest category of agencies surveyed in 1983-84 consisted of agencies where the primary focus was on services other than residential care programs. There was a wide range of services provided by these agencies, as indicated in Table 12 below. The table summarizes information about service components which was available from the Application for Accreditation Survey (A.A.S.) forms.

Table 12
SERVICE COMPONENTS OF 84 AGENCIES
PROVIDING NON-RESIDENTIAL SERVICES
(As Reported by Agencies on A.A.S. forms)

	# OF AGENCIES OFFERING THE SERVICE COMPONENT:		
COMPONENT	PUBLIC (n=10)	PRIVATE (n=74)	TOTAL (n=84)
Residential (all types)	4	50	54
Day Program	2	31	33
Work Activity Center	3	19	22
Vocational Training Program	1	12	13
Activity Center		9	9
School Program	2	6	8
Early Intervention Program		6	6
Extended Employment Program		6	6
Regional Center	4		4
Adult Activity		3	3
Day Care		3	3
Case Management	2		2
Day Development Program		2	2
Family Training Program		2	2
In-home Training Program		2	2
Community Survival	1		1
Congregate Living	1		1
Evaluation and Training Program	1		1
University Affiliated Program	1		1
Alternative Living Unit		1	1
Apartment Training Program		1	1
Child Development Program		1	1

Table 12 (Continued)

	# OF AGENCIES OFFERING THE SERVICE COMPONENT:		
COMPONENT	PUBLIC (n=10)	PRIVATE (n=74)	TOTAL (n=84)
Day Activity/Adult		1	1
Diagnosis		1	1
Education		1	1
Employment Training		1	1
Group Home		1	1
Home Training		1	1
Horticultural Training Program		1	1
Parent Training		1	1
Pre-academic Training Program		1	1
Pre-vocational Program		1	1
Recreation Program		1	1
Respite Care		1	1
Retail Training Program		1	1
Self-help Training Program		1	1
Summer Camp		1	1
Transportation Training Program		1	1

As the table indicates, agencies categorized by the Project as "non-residential" provided an extensive number of service components, including residential options. Since the information in the table was compiled from A.A.S. forms (and from narratives in Survey Reports), it was not highly reliable. It should therefore be noted that there is probably an even larger number of service components being offered by these agencies currently surveyed by ACMRDD. Furthermore, we were not able to distinguish specific types of residential service, except by size. Thus, the "residential" component in this table refers to a large variety of group home, foster home, supported living, ICF/MR and other types of residential service. A similar variety of service types is also subsumed under "day program" in the table.

The characteristics of individuals served and of staff in the primarily non-residential agencies are presented below in Table 13. (Please refer to Table 10 above for comparison to all agencies surveyed in 1983-84). The primarily non-residential agencies had significantly lower staff to resident ratios when compared to all agencies surveyed by ACMRDD. This reflected the fact that many of these agencies served large numbers of clients for relatively short periods of time. Many agencies, for example, provided services for only a part of the day, or only provided limited assistence such as case management.

Private agencies had a significantly smaller median size than public agencies in terms of clients and staff; however, the largest of all primarily non-residential agencies in terms of clients (at 2,159 clients and 275 staff), was a private, metropolitan area association.

Table 13
NON-RESIDENTIAL AGENCIES
SURVEYED BY ACMRDD, 1983-84

	PUBLIC AGENCIES			PRIVATE AGENCIES		
CHARACTERISTIC	ACCRED.	NOT ACCRED.	TOTAL	ACCRED.	NOT ACCRED.	TOTAL
Number of Agencies	8	2	10	50	24	74
Percent Accredited	80%	20%	---	68%	32%	---
Total Clients	3,195	1,316	4,511	9,766	2,119	11,885
Range, Clients	25-1,054	82-1,234	25-1,234	19-2,159	20-241	19-2,159
Median Clients	330	658	330	84	62	80
Total Staff	999	513	1,512	2,538	722	3,260
Range, Staff	7-361	50-463	7-463	7-275	4-159	4-275
Median Staff	62	257	63	31	22	27
Staff/Resident Ratio	.31	.39	.34	.26	.34	.27
Median Staff Ratio	.18	.50	.34	.36	.27	.34
% Sev./Profound*	44%	59%	49%	31%	39%	32%
% Mild/Moderate	56%	41%	51%	69%	61%	68%
% 0-6 Years Old	11%	7%	10%	8%	9%	8%
% 7-17 Years Old	15%	25%	18%	13%	3%	11%
% 18 Years & Older	74%	68%	72%	79%	88%	81%

* Eighty-one percent of total public agency clients were mentally retarded; 89% of private agency clients.

While private non-residential agencies served individuals who were less severely handicapped than those served in large public and private residential programs, the functional levels were comparable to small private residential agencies (Table 11). However, the public agencies providing primarily residential services served a larger percentage of substantially handicapped individuals, and a larger percentage of younger individuals than did the private agencies.

Residential Components of Non-Residential Agencies. The non-residential agencies were so categorized because their major focus was in day training, vocational, special education, case management or other types of non-residential services. However, as was noted in Table 12 above, many of the non-residential agencies provided group home, supported living, or other types of residential programs. In fact, residential services were provided by all types of agencies, to one degree or another, as indicated in Chart 6 below. Two small residential agencies operated larger sites (sixteen beds or more), while large private residential agencies, in addition to their primary service component of 16 bed or larger sites, often provided services in the smaller, 15 bed or less settings. Non-residential agencies operated several 16 bed or larger sites, and over 400 small sites.

Chart 6 also indicates that small private residential agencies provided some non-residential services. On the other hand, the large public and private residential agencies provided all services in residential sites. Table 14 below provides more detail on the residential components of agencies, indicating number of residential sites, number of residents, and residents per site for sites of fifteen beds or less, and for sites of sixteen beds or more. Although not indicated in the Table, four large public residential agencies in the 1983-84 survey group reported a total of 6 state-operated group homes with a total of 50 beds.

Table 14
RESIDENTIAL COMPONENTS OF AGENCIES SURVEYED BY ACMRDD, 1983-84

	LARGE PRIVATE RESIDEN.	SMALL PRIVATE RESIDEN.	PUBLIC NON-RESIDEN.	PRIVATE NON-RESIDEN.	TOTAL
# Agencies providing 16 Beds or Larger	14	2	1*	9	23
# Sites 16 + Beds	26	2	1	10	39
# Individuals	1,678	97	83	448	2,306
Average/Site	65	49	83	45	59
# Agencies providing 15 Beds or Less	6	28	4	47	85
# Sites 15/Less	32	210	89	329	660
# Individuals	129	1,018	356	1,422	2,925
Average/Site	4	5	4	4	4

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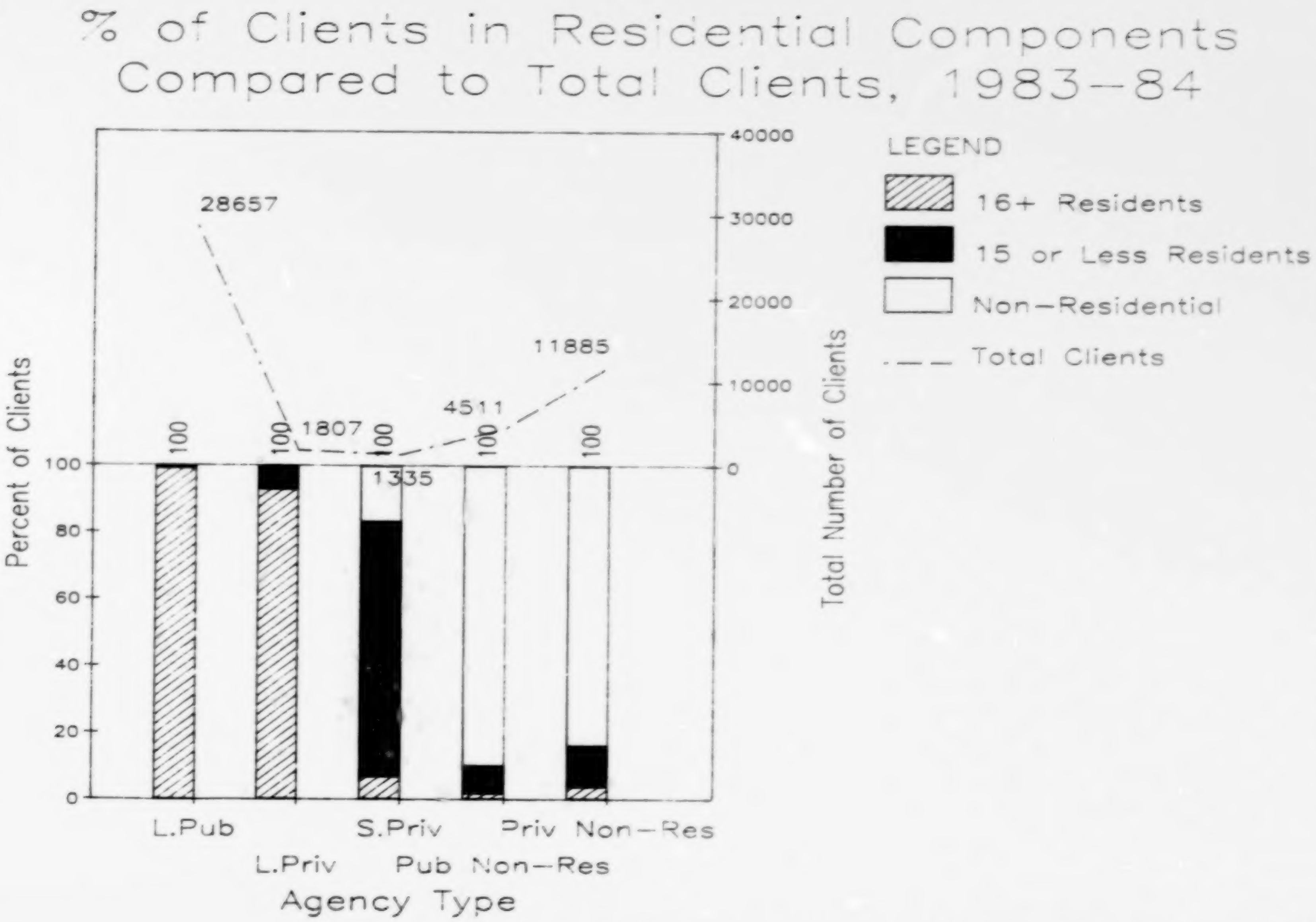
*The single public non-residential agency providing service in an 83-bed site was a regional center, which primarily provided case management and day services to nearly a thousand individuals.

CHART 6



Source: Evaluation & Public Policy Program, ISDD, U of IL at Chicago, 1985

SECTION 3: ADDITIONAL ANALYSIS OF AGENCY CHARACTERISTICS

The following pages contain tables and charts which compare the five types of agencies recapping the information presented on each category in Section 2 above, and presenting additional information on the number of years in operation.

Clients Served

Table 15 provides a comparative summary of the number of individuals served in the five types of agencies surveyed by ACMRDD in 1983-84.

Table 15
CLIENTS SERVED IN 186 AGENCIES SURVEYED
BY ACMRDD, 1983-84

	L. PUBLIC RESIDENT.	L. PRIV. RESIDENT.	S. PRIV. RESIDENT.	PUB. NON-RES.	PRIV. NON-RES.	TOTAL
# Served	28,657	1,807	1,335	4,511	11,885	48,195
Accred.	23,201	1,421	880	3,195	9,766	38,463
Non-Accr.	5,456	386	455	1,316	2,119	9,732
Range						
Accred.	27-1,854	56-548	5-188	25-1,054	19-2,159	5-2,159
Non-Accr.	96-1,053	22-179	11-63	82-1,234	20-241	11-1,234
Median	380	80	42	330	80	117
Accred.	343	87	46	330	84	144
Non-Accr.	403	76	32	658	62	74
% of Total*	59%	4%	3%	9%	25%	100%
Accred.	48%	3%	2%	6%	20%	79%
Non-Accr.	11%	1%	1%	3%	5%	21%

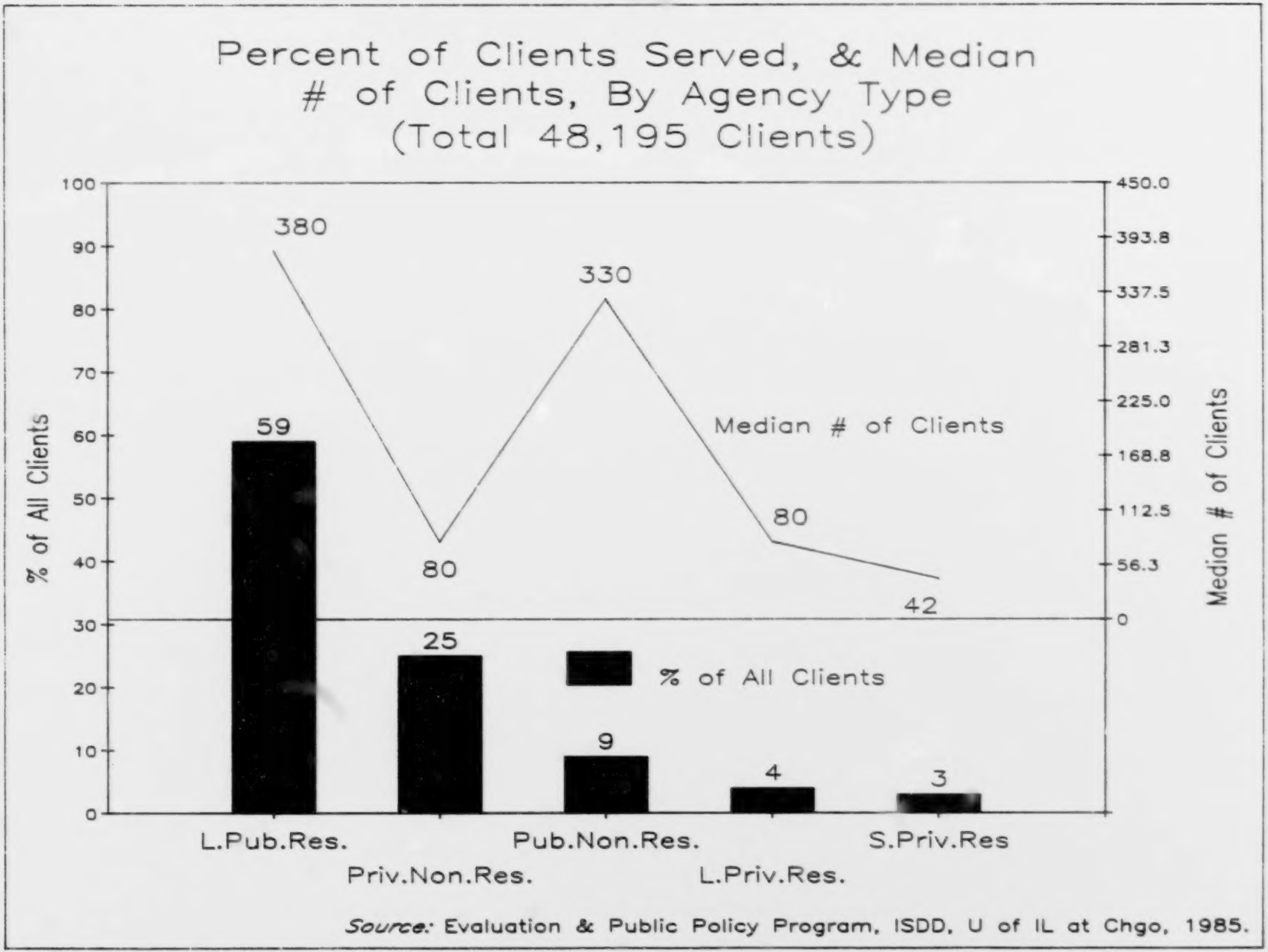
*Percent of total 48,195 clients served by 186 agencies.

As indicated by this summary, the category of large public residential dominated among ACMRDD agencies in 1983-84, serving 59% of the total 48,195 served by all 186 agencies. The next largest number of clients was served in private non-residential agencies. As was indicated in Table 10, 70% of all agencies surveyed in 1983-84 were accredited, and 79% of all clients served resided in accredited agencies.

Chart 7 indicates the percent of all 48,195 clients served by each type of agency, and the median number of clients for each. The large public residential category of agency provided services to the largest number of individuals (59%), and also had the largest median size (380). Public non-residential agencies, which offered case management and regional center services to large numbers of individuals had a median client size of 330, yet these ten agencies only served 9% of all clients served in 1983-84. Next to large public residential agencies, the private non-residential programs served the largest number of individuals (25%; 11,885 individuals); however, there were 74 agencies and the median number of individuals served in a variety of work, day training, recreation, supported living and other services was only 80. The smallest number of individuals was served by large private residential programs (4%) and by small private residential programs (3%).

Table 16 below compares the five types of agencies on the basis of total staff, staff ratios, percent of individuals served who are severely/profoundly retarded, percent of individuals served by age category, and the average number of years of operation.

CHART 7



Source: Evaluation & Public Policy Program, ISDD, U of IL at Chgo, 1985.

Table 16
STAFF RATIOS, % SEVERE/PROFOUND, AGE CATEGORIES, AND MEDIAN NUMBER OF YEARS IN OPERATION: 186 AGENCIES SURVEYED BY ACMRDD, 1983-84

	L. PUBLIC RESIDENT.	L. PRIV. RESIDENT.	S. PRIV. RESIDENT.	PUB. NON-RES.	PRIV. NON-RES.	TOTAL
Median #Staff	551	93	24	63	27	56
Accredited	444	128	24	62	31	80
Non-Accr.	690	27	25	257	22	30
Staff Ratio	1.37	1.25	.67	.34	.30	.96
Accredited	1.30	1.44	.67	.31	.26	.93
Non-Accr.	1.65	.61	.66	.39	.34	1.07
Median Ratio	1.49	1.31	.62	.34	.34	.58
Accredited	1.44	1.49	.52	.22	.36	.60
Non-Accr.	1.71	.59	.69	.49	.27	.56
% Sev./Prof.	81%	60%	30%	49%	32%	65%
Accredited	80%	59%	33%	44%	31%	64%
Non-Accr.	86%	64%	24%	59%	39%	69%
% 0-6 Years	2%	2%	1%	10%	8%	4%
Accredited	3%	2%	1%	11%	8%	5%
Non-Accr.	1%	1%	0%	7%	9%	3%
% 7-17 Years	16%	29%	9%	18%	11%	15%
Accredited	15%	34%	12%	15%	13%	15%
Non-Accr.	18%	8%	3%	25%	3%	14%
% 18 + Years	82%	69%	90%	72%	81%	81%
Accredited	82%	64%	87%	74%	79%	80%
Non-Accr.	81%	91%	97%	68%	88%	83%
Median Yrs.in Operation	20	16	10	16	16	16
Accredited	17	23	11	14	14	16
Non-Accr.	41	13	10	20	16	16

Staff-to-Client Ratio

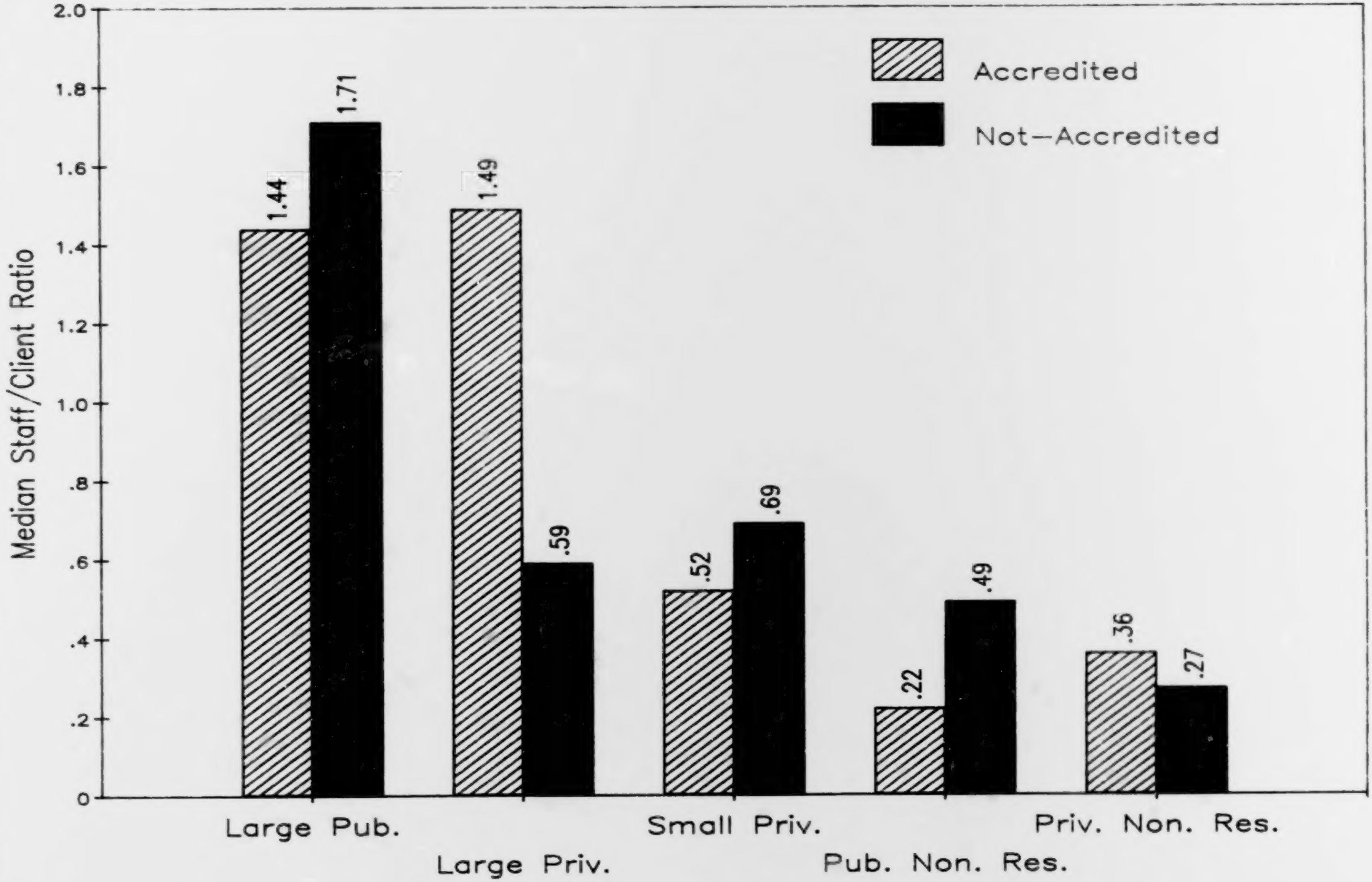
The staff/client ratio when calculated by dividing all agencies' staff by all agencies' clients (average staff ratio) seemed to indicate that better staff ratios were inversely related to accreditation success. However, large public residential facilities served 59% of all 48,195 clients, and had 84% of the total of 46,503 staff. Thus, the median staff ratio probably more effectively distinguished between the "typical" agency within the total of 186 agencies. Chart 8 indicates these median staff ratios.

As Chart 8 indicates, the median staff ratio for large public residential agencies was better for the 14 non-accredited facilities than for the 60 accredited facilities (1.71 compared to 1.44). The median staff/resident ratios also were better for non-accredited small private residential agencies compared to those accredited (.69 compared to .52); and the same was true for non-accredited public non-residential agencies (.49 compared to .22). However, staff-resident ratios for public non-residential must be understood in a different context than 24-hour residential care settings. It was not always possible to express non-residential client numbers in terms of a 24-hour full-time equivalency, and most clients were served in programs which provided hourly services five days per week, or on a weekly basis.

Large private residential agencies which were accredited had a significantly higher median staff to resident ratio than their non-accredited counterparts (1.49 compared to .59). Thus, accredited large private residential programs had a median staff ratio (1.49) exactly equal to that of large public residential agencies overall (accredited and non-accredited--see Table 16). Private non-residential programs which were accredited also had a better median staff/resident ratio than the non-accredited agencies of that type (.36; .27). As with public non-residential programs, the private non-residential agencies provided a great variety of non-residential services for which it was difficult to directly compare the number of clients served to the number of 24-hour residential care clients. Finally, small private residential programs which were not accredited had slightly better median staff ratios than those which were accredited (.69; .52).

CHART 8

Median Staff Ratios By Type of Agency, 1983—84



Source: Evaluation & Public Policy Program, ISDD, U of IL at Chgo, 1985.

Median Number of Clients

The relationship between accredited and non-accredited agencies on the factor of median number of clients served varied greatly between types of agencies. Accredited large private residential agencies, small private residential agencies, and private non-residential agencies all had a slightly higher median client number than their non-accredited counterparts. However, accredited large public residential agencies and public non-residential agencies were smaller than those agencies which were not accredited. Keeping in mind that non-residential agency client numbers cannot be directly equated to client numbers in residential programs, there may be some indication in these data that, up to a certain program size (as indicated by number of clients served), a larger agency has a better chance organizationally of meeting accreditation requirements. Over-all, in 186 agencies, median client size of accredited agencies was 144 compared to 74 for non-accredited programs. However, many of the smaller agencies which were not accredited were undergoing first surveys, and other factors as well may have contributed to accreditation outcome.

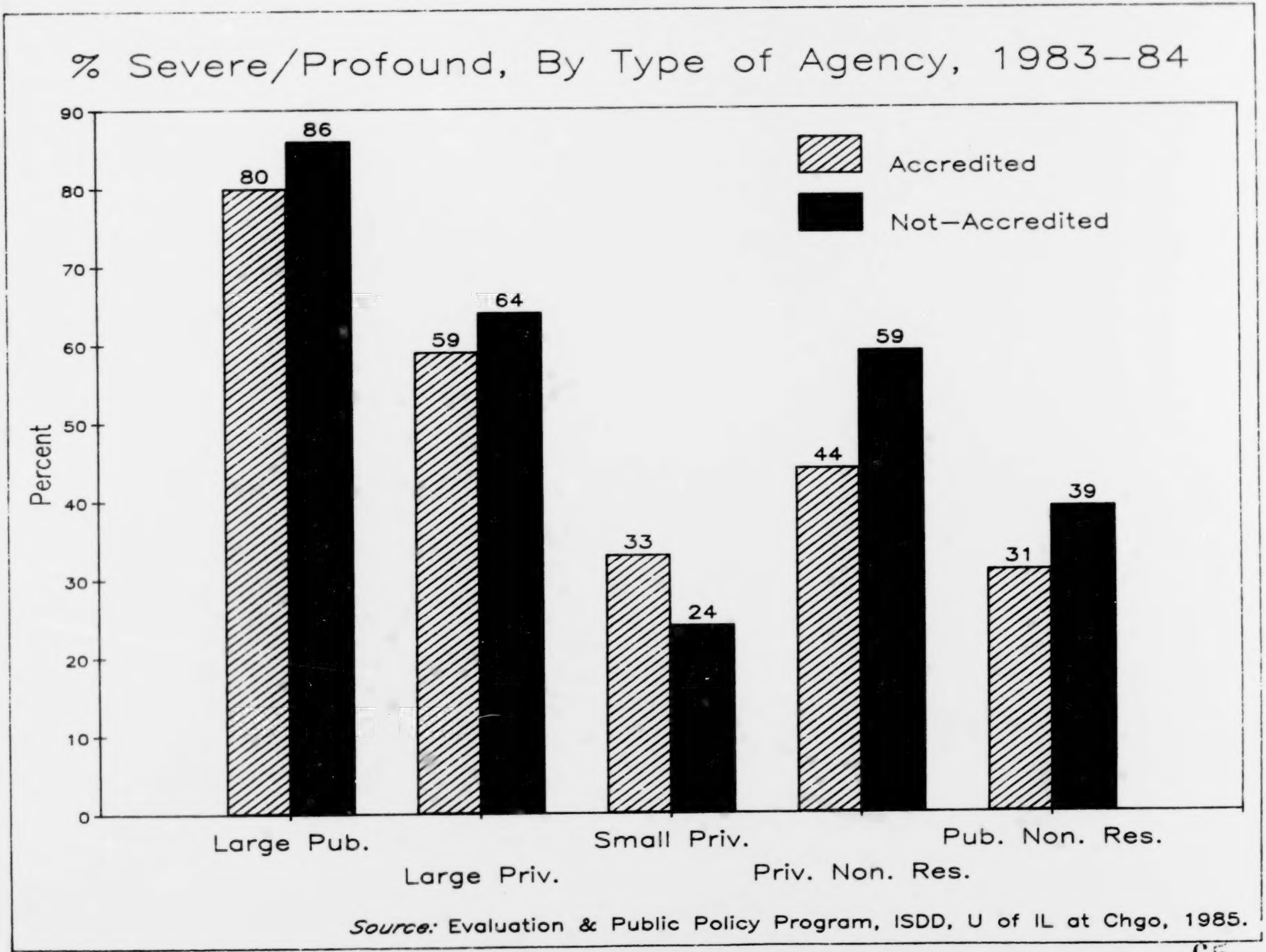
Median Number of Staff

Besides clients served, the median number of staff for a type of agency is an indication of the over-all scope of the operation. The median staff numbers for the types of agencies (accredited and non-accredited) are indicated above in Table 16. While the accredited large private residential agencies had a significantly higher median staff number than their non-accredited counterparts (128 compared to 27), the opposite was true of large public residential facilities (444 for accredited compared to 690 for non-accredited). Small private residential agencies and private non-residential agencies had nearly identical accredited vs. non-accredited median staff numbers, and public non-residential agencies which were non-accredited had a significantly higher median staff number (257) than did the accredited agencies (62). Over-all, the 131 accredited agencies had a median staff size of 80 compared to only 30 staff for the 55 non-accredited agencies.

Severity of Clients Served

In all types of agencies except small private residential, the accredited group served a slightly smaller percentage of individuals with severe/profound mental retardation than did the non-accredited group (see Chart 9 below). (Ninety-three percent of all clients in 186 agencies were mentally retarded; the lowest percentage of mentally retarded individuals among those served was in public non-residential agencies, where the percentage was 81%.)

CHART 9



% Severe/Profound, By Type of Agency, 1983–84

Source: Evaluation & Public Policy Program, ISDD, U of IL at Chgo, 1985.

Children Under 18 Years of Age

Although Chart 10 below indicates that, over-all, accredited agencies served a slightly higher percentage of individuals under eighteen years of age, there was measurable variation from one agency type to another. The agency type which served the largest percentage of younger individuals over-all (large private residential), also served relatively more individuals under eighteen in accredited agencies than in non-accredited agencies. However, in the agency type serving the next highest percentage of younger individuals over-all (public non-residential), it was non-accredited agencies which served proportionately more individuals under eighteen years of age.

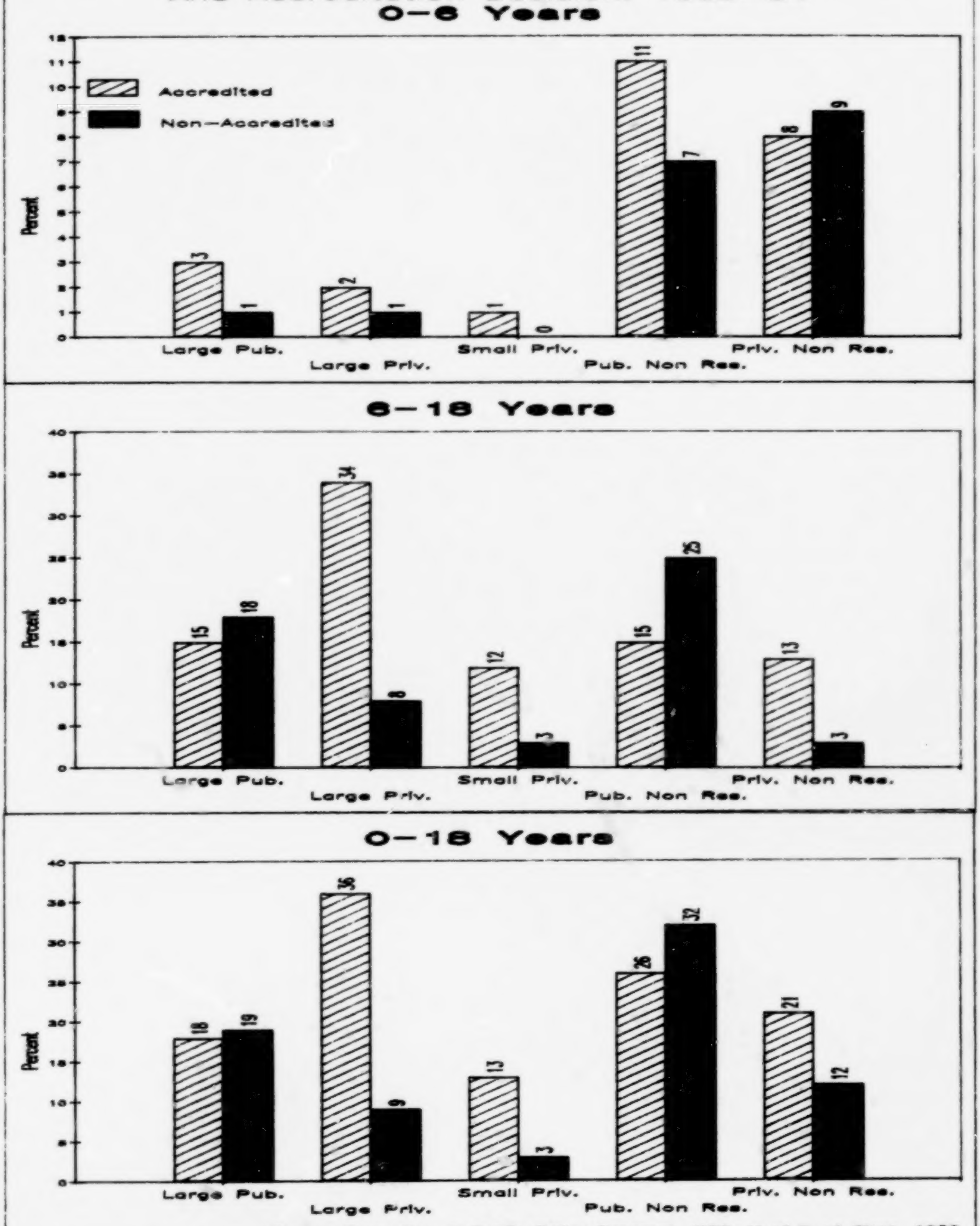
Median Years in Operation

Chart 11 shows that the median number of years which agencies were in operation varied considerably between types of agencies, and varied as well in relationship to accreditation success. For large public residential agencies, the median age of forty-one years for non-accredited facilities indicated that these were physical plants which probably were not adaptable to many of the ACMRDD requirements. On the other hand, median ages of both accredited and non-accredited large private residential agencies were significantly less than the forty-four years for non-accredited public facilities. Accredited large private residential programs are slightly older than non-accredited agencies of the same type.

Small private residential programs which were accredited had a median age of eleven years compared to ten years for non-accredited agencies. The median years of operation of accredited public and private non-residential agencies was fourteen; and for both agency types, the non-accredited groups were slightly older.

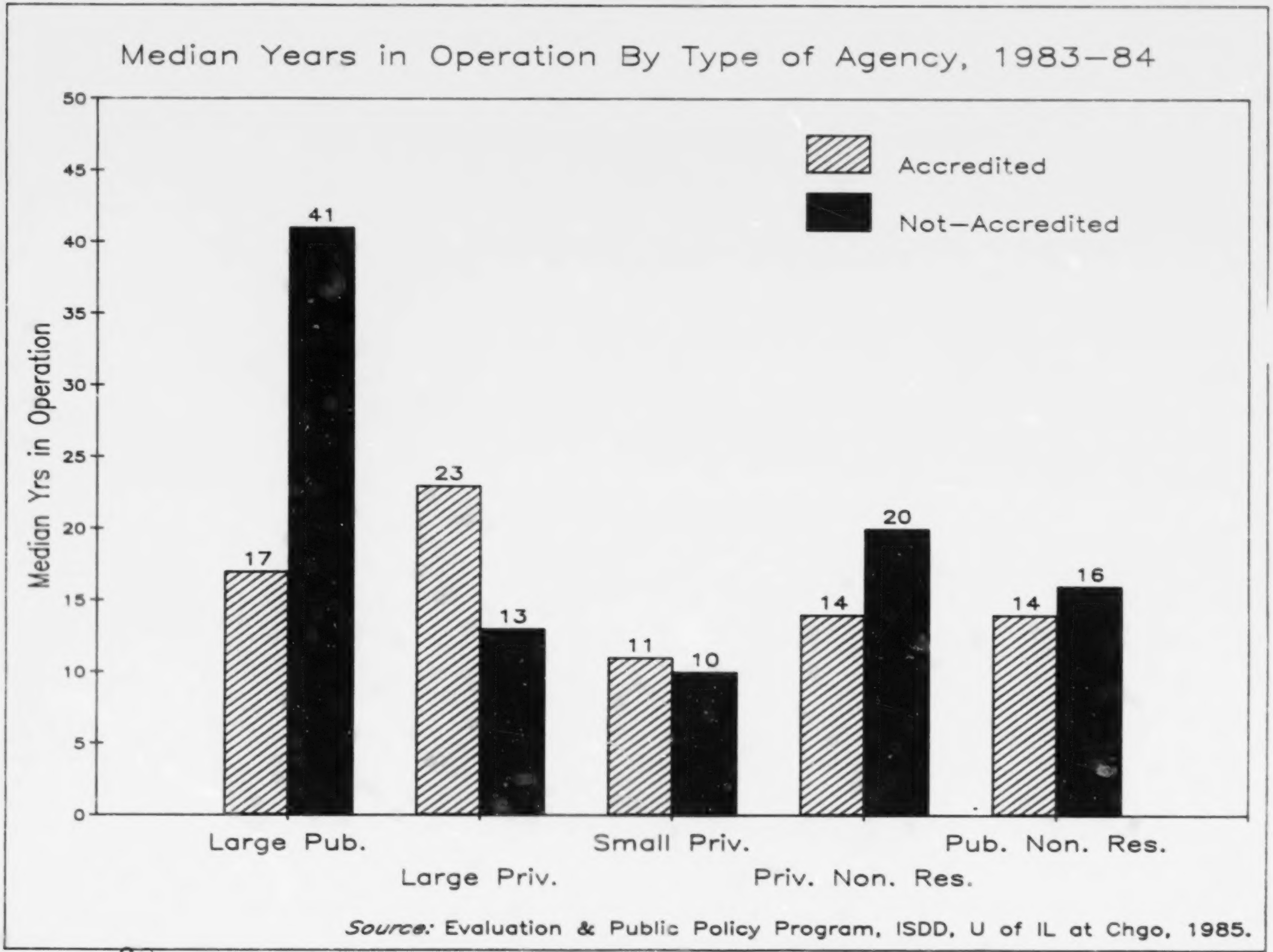
CHART 10

Percentage of Children Served, By Type of Agency And Accreditation Decision: 1983–84



Source: Evaluation & Public Policy Program, ISDD, U of IL at Chgo. 1986.

CHART 11



Median Years in Operation By Type of Agency, 1983–84

Source: Evaluation & Public Policy Program, ISDD, U of IL at Chgo, 1985.

SECTION 4: IMPACT OF PREVIOUS SURVEYS

The Report to this point has reviewed the survey activity of ACMRDD from 1980 to 1984; presented the major agency and client characteristics of the five types of agencies currently surveyed; and presented comparative information on certain major data elements (numbers of individuals served, staff ratios, functional levels, age levels and average years in operation). The discussion now turns to more detail on the survey results--comparing average number of previous surveys and the average number of applicable "A" Standards. Table 17 below presents this information for the 186 agencies surveyed in 1983-84.

Table 17
AVERAGE NUMBER OF PREVIOUS SURVEYS, AND
AVERAGE NUMBER OF APPLICABLE STANDARDS, 186 AGENCIES
SURVEYED BY ACMRDD, 1983-84

	L. PUBLIC RESIDENT.	L. PRIV. RESIDENT.	S. PRIV. RESIDENT.	PUB. NON-RES.	PRIV. NON-RES.	TOTAL
# of Agencies	60	14	28	10	74	186
Average #						
Prev. Surveys	1.7	.8	.6	.7	.8	1.1
Accredited	1.9	1.1	.8	.9	1.0	1.3
Non-Accr.	1.2	.2	.3	.0	.3	.4
Average # Applicable						
"A" Standards	684	646	611	573	587	626
Accredited	691	671	629	585	599	641
Non-Accr.	658	600	583	523	564	589
% Agencies Accredited	78%	64%	61%	80%	68%	70%

Inspection of Table 17 reveals that, for every type of agency and for agencies overall, the accredited agencies had a higher average number of previous surveys and a higher average number of applicable "A" standards. In the case of previous surveys, this finding is consistent with expectations given the nature of the ACMRDD process. Given the complexity of standards, and the large number of requirements related to clinical program documentation, systematization of staff interactions, and organization of a number of management procedures, it probably helps to go through the preparation for a survey visit. Table 18 below relates the number of previous surveys to accreditation decision.

Table 18
PERCENT OF AGENCIES ACCREDITED, ON PREVIOUS AND
CURRENT SURVEYS: 186 CURRENTLY SURVEYED AGENCIES

	% OF AGENCIES ACCREDITED ON SUCCESSIVE SURVEYS:					
AGENCIES WITH:	FIRST	SECOND	THIRD	FOURTH	FIFTH	SIXTH
5 Previous Surveys (n=5)	20%	100%	100%	100%	100%	100%
4 Previous Surveys (n=9)	78%	100%	100%	100%	89%	
3 Previous Surveys (n=18)	78%	94%	100%	89%		
2 Previous Surveys (n=24)	92%	100%	92%			
1 Previous Survey (n=49)	73%	82%				
0 Previous Surveys (n=81)	49%					
AVERAGE, EACH SURVEY	65% (n=186)	91% (n=105)	96% (n=56)	94% (n=32)	93% (n=14)	100% (n=5)

Forty-nine percent of the agencies in this current database which were undergoing their first survey were accredited. By comparison, only 20% of the agencies which had five previous surveys were accredited on their first survey; agencies which had from 1 to 4 previous surveys had been the most successful on first surveys, with from 73% to 92% being accredited for one or two years.

Table 18 in the first column, then, suggests that there may have been different "cohorts" of agencies entering the ACMRDD accreditation process each year--the first group (those with five previous surveys) we know to be primarily large public residential facilities, while the group of 81 agencies which were undergoing their first survey was largely comprised of small private residential and public/private non-residential agencies. There are two limitations of the current database in terms of drawing conclusions about the effects of previous surveys: the "n's" are small for those agencies which had several previous surveys, and 44% of the 186 agencies were those with no previous surveys to use for comparisons.

Nevertheless, for each cohort of agencies (based on its number of previous surveys) there was a noticeable improvement between first and second survey. Sixty-five percent of agencies overall were accredited on their first survey, but 91% of the 105 agencies with a first survey were accredited on their second survey. The table also indicates that there were agencies which were accredited in one or more surveys, but subsequently failed to receive accreditation, confirming that ACMRDD success is not "automatic" in subsequent surveys after accreditation was initially granted.

The number of "A" standards applicable (Table 17 above) was an indication of how compatible an agency was to the specific type of review embodied in the ACMRDD survey process. In other words, agencies which provide services in the comprehensive manner defined by the Standards tend to do better with those survey requirements. Another way to look at these two factors is to rank order the five agency types according to the percentage of agencies in each which were accredited, then to compare--for these accredited agencies--the average number of previous surveys and average number of applicable "A" standards. This is presented below in Table 19.

Table 19
RANK ORDER OF AGENCY TYPES BY % ACCREDITED,
COMPARED TO PREVIOUS SURVEYS, AND APPLICABLE "A" STANDARDS

TYPE OF AGENCY	% ACCREDITED	ACCREDITED AGENCIES: AVE. # PREVIOUS SURVEYS	AVE.# APPLIC. "A" STANDARDS
Public Non-Residential	80%	.9	585
Large Public Residential	78%	1.9	691
Private Non-Residential	68%	1.0	599
Large Private Residential	64%	1.1	671
Small Private Residential	61%	.8	629
TOTAL ACCREDITED	70%	1.3	641
TOTAL NON-ACCREDITED	30%	.4	589

As Table 19 indicates, the average number of previous surveys was 1.3 for accredited agencies of all types, compared to only .4 average previous surveys for non-accredited agencies of all types. The accredited agencies in all agency types except one (public non-residential) had a higher average number of applicable "A" standards than did non-accredited agencies. It should be pointed out, however, that the number of applicable standards does not necessarily denote an optimal program setting, nor does ACMRDD so contend.

For example, a maximally comprehensive 24-hour residential care agency which provides all services to individuals at a specific program site is not necessarily providing better programs than another agency which encourages client involvement in services provided by other agencies and/or generic services. It is perhaps most appropriate to compare comprehensiveness (as indicated by number of applicable standards) within a given category of agency.

SECTION 5: IDENTIFICATION OF CRITICAL STANDARDS

A critical standard was defined as "a Category A standard which was found deficient in 40% or more of the surveys of a particular type of agency." The types of agency were defined as "large residential," "small residential," and "non-residential." [Critical standards were not determined for the smaller subsets of private/public within each category.] For these three types of agencies, critical standards were determined for accredited agencies, non-accredited agencies and for both combined.

Appendix #5 displays the critical standards for large residential, small residential and non-residential agencies, respectively. The standards are in the order in which they appear in the 1984 edition of the ACMRDD *Standards*, and are identified by the ACMRDD classification numbers as they appear in that document. In addition, for each of the standards which met the 40% criterion, a short, summary phrase to identify the nature of the standard was developed. *It should be stressed that these summaries were not meant to express the full definition or intent of the standards*, but rather to orient the reader to the basic content area which the standard addressed. The three tables also compare the percentages of accredited agencies, non-accredited agencies, and of all agencies within the agency type which were found to be in less than full compliance with each standard.

For example, in *Appendix #5*, the first entry is Standard 1.1.1: "I.D. (Interdisciplinary) team identified for each individual." The standard relates to whether or not the survey team found any evidence in the sampled record for a resident/client indicating that there was failure to identify a *single* I.D. team, regardless of how many agencies provided services to the individual. In this example for Standard 1.1.1, 48% of 56 accredited large residential agencies (29 agencies) were found to be in less than full compliance with the standard; 78% of eighteen non-accredited agencies (14 agencies) and 55% of 74 total agencies (41 large residential agencies) were in less than full compliance with Standard 1.1.1.

Review of the tables of critical standards for the three types of agencies reveals the difficulties which all agencies had with certain sections of ACMRDD standards. For example, there were no critical standards in the Sections "Research & Research Utilization" and "The Agency in the Service Delivery System" for any of the three types of agencies. And, for all three types of agencies the first section of the standards, "Individual Program Planning & Implementation" contained the highest number of critical standards (62, 59 and 72 for large residential, small residential and non-residential agencies, respectively). The relative numbers of critical standards which particular types of agencies had in other sections points out the different focus of large residential, small residential and non-residential agencies. As expected, non-residential agencies had no critical standards in the section "Alternative Living Arrangements," whereas large residential agencies had 26 critical standards in this section.

The number of critical standards for non-accredited non-residential agencies and small residential agencies in the Section "Individual Program Support" (24 and 19 critical standards, respectively) appeared to relate to lack of clinical record organization, lack of structured staff training programs, and insufficient formal arrangements for professional services. Critical standards in the section "Safety & Sanitation" for small residential agencies (11 critical standards) pointed to problems which these agencies, operating small types of residences, had with life-safety provisions and other physical plant concerns. Some of the same types of problems affected non-residential agencies, which, as was indicated in Table 14 above, also operated many small residential units.

Table 20 provides a summary by Section of the number of critical "A" standards which were displayed in Appendix #5. The table also compares critical standards for accredited agencies vs. non-accredited agencies.

Table 20
CRITICAL STANDARDS BY SECTION OF ACMRDD STANDARDS, ACCREDITED VS. NON-ACCREDITED AGENCIES

STANDARDS SECTION	# "A" STANDS.	LARGE RES. ACCR.	LARGE RES. NON	SMALL RES. ACCR.	SMALL RES. NON	NON-RES. ACCR.	NON-RES. NON
Program Planning	281	30	61	28	58	33	72
Alternative Living	89	13	25	-0-	1	-0-	-0-
Rights	91	2	4	2	7	3	7
Program Support	240	5	12	6	19	2	24
Safety	53	-0-	2	3	11	-0-	6
Research	22	-0-	-0-	-0-	-0-	-0-	-0-
Service System	18	-0-	-0-	-0-	-0-	-0-	-0-
TOTALS	794	50	104	39	96	38	109

As the table indicates, the types of agencies which do not have a congregate living focus have significantly fewer critical standards in the Alternative Living Arrangements section. The table also demonstrates that the critical standards in, for example, Safety and Sanitation occurred primarily in non-accredited agencies. For three of the sections--Individual Program Planning and Implementation, Achieving and Protecting Rights and Individual Program Support--accredited agencies within each type had less critical standards.

Table 20 indicates that, at least in their basic overall structure, ACMRDD survey standards differentiated between the basic types of agencies by evaluating the predominant service components. And, the standards focused as well on basic program requirements for all agencies. Appendix #6 to this Report provides a different method for analysis of critical standards. In a thirteen page table, there is an analysis of "overall critical standards." All 186 surveys (both accredited and non-accredited) were combined for the first column of this table, and the percentages of non-compliance on each "A" standard for this total group were rank-ordered from highest to lowest. Then, the percentages of non-compliance for each of the five types of agencies (also combined accredited and non-accredited) were arrayed next to this overall critical standards list, thus demonstrating the relative difficulty which each of the five agency types had with the "A" standards which were most critical to all surveyed agencies in 1983-84.

For example, in the first line of Appendix #6, Standard 1.5.2.1, "Individual's program coordinator attends to spectrum of needs" was the single most critical standard for all 186 agencies. The different agency types had difficulty with that standard ranging from 100% (small private residential and public non-residential) to 93% for large public residential and large private residential. The Appendix indicates that a number of individual standards were of considerable difficulty for one or more types of agency, but not for others.

Another example, near the bottom of the first page is Standard 2.1.7, with which 43% of all agencies were not in compliance. Looking at the next column to the right, Large Public Residential, it can be seen that 97% of these agencies were in less than full compliance. On the other hand, only 7% of the Small Private Residential agencies had a problem with this particular standard. (The summary of this Standard 2.1.7 can be found in Appendix #5, under Large Residential: "Living arrangements used are integrated within the community.") Appendix #7 presents the same information as Appendix #6, except that the standards are placed in the order in which they appear in the ACMRDD Standards.

A final analysis of the performance by agencies surveyed in 1983-84 consists of those "A" standards for which there were no deficiencies. The Project's assessment of the 186 surveys indicated that there were a total of 162 Category A standards with which all agencies, accredited or non-accredited, were assumed to be in full compliance. These standards are presented in Appendix #8.

Inspection of the individual standards listed in Appendix #8 and of the sections and sub-sections in which they are contained revealed that many pertained to service components which were offered by few, if any, of the 186 surveyed agencies (e.g. recreation programs, homemaker services, etc.). With most other standards in Appendix #8, it appeared that the standard addressed an issue central to the provision of a particular service component. In other words, few agencies offering the component were likely to be deficient on such a major requirement. Nevertheless, review of these standards may reveal issues beneficial to future modification of ACMRDD standards.

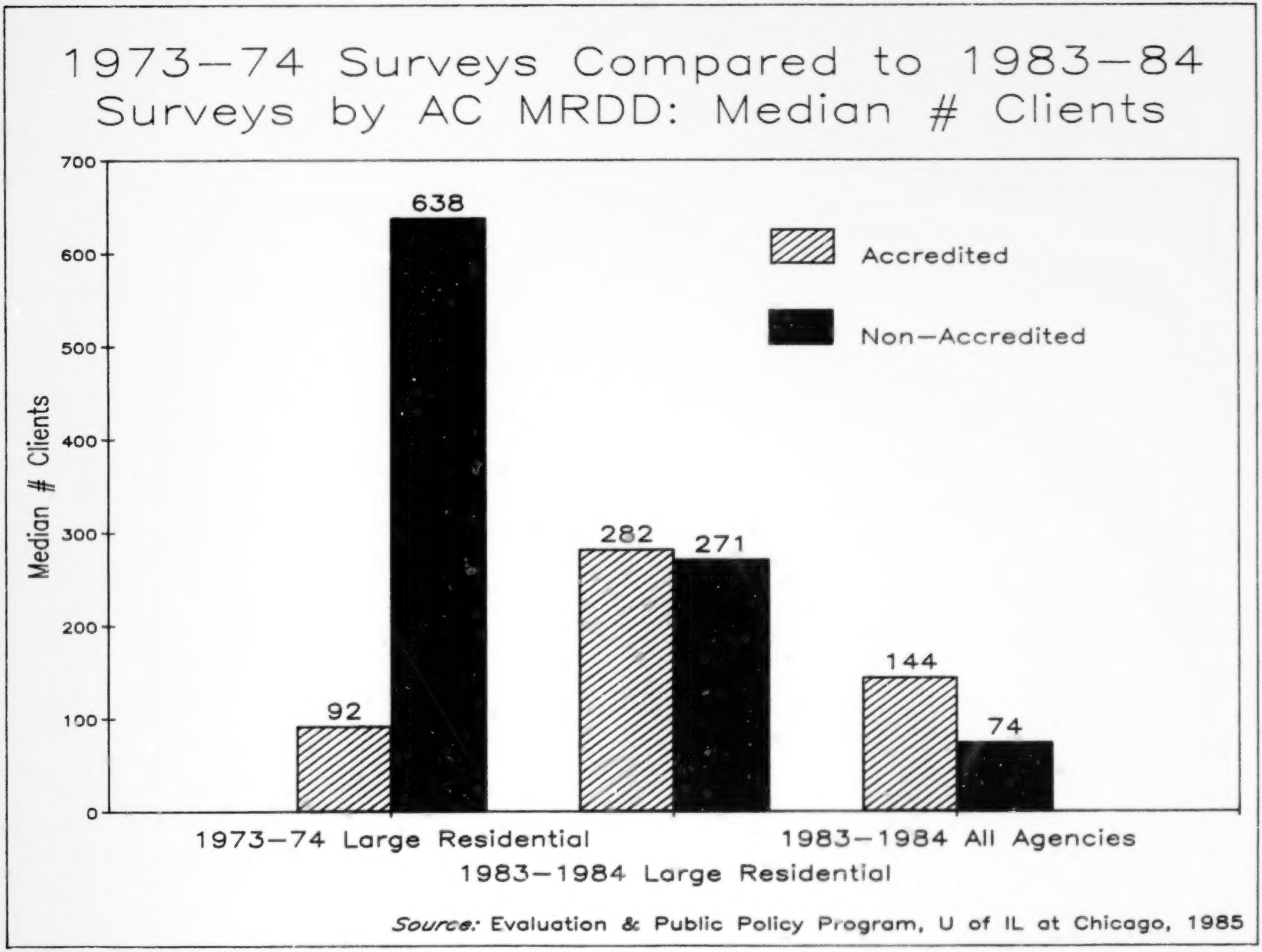
PART III: SUMMARY AND CONCLUSION

The Accreditation Project reviewed 296 ACMRDD Surveys extending from July, 1980, through December, 1984. A classification system was adopted consisting of five service categories: large public residential, large private residential, small private residential, public non-residential and private non-residential. This classification system distinguished between public and private ownership, and between residential services provided primarily in large, congregate arrangements compared to residential services which were provided primarily through small residential programs, thus reflecting the great variety of agencies which were surveyed by ACMRDD. Survey data from 1973-74 on large public and private residential agencies were also compared to data from recent surveys.

When Braddock (1975, 1977) reviewed a sample of 48 agencies surveyed in 1973-74 by ACF/MR, he noted that 93% of the agencies were publicly operated, 27% were accredited, and the median accredited agency served 92 individuals, compared to 638 in the median non-accredited facility. By comparison, 81% of the 74 large residential agencies surveyed in 1983-84 by ACMRDD were publicly operated, a significantly larger 76% were accredited than was the case in 1973-74, and the median size accredited agency served 282, compared to 271 in the eighteen non-accredited facilities.

The contrasts between comparable facilities in 1973-74 and 1983-84, however, were only partial indications of the significant changes in the types of agencies being surveyed by ACMRDD today. When all 186 agencies surveyed in 1983-84 were considered, only 38% were publicly-operated and 70% were accredited, and the median accredited agency size was only 144 (74 for non-accredited programs). These comparisons of median number of clients for 1973-74 large residential agencies to large residential agencies, and to all agencies, surveyed in 1983-84 are indicated in Chart 12.

CHART 12



1973–74 Surveys Compared to 1983–84 Surveys by AC MRDD: Median # Clients

Source: Evaluation & Public Policy Program, U of IL at Chicago, 1985

Chart 13 below summarizes, for selected agency, client and survey characteristics reviewed by the Accreditation Project, the comparison of accredited agencies (n=131) to non-accredited agencies (n=55). In order to indicate, on one chart, the relationships between measures which would require vastly different scales on the horizontal axis, all relationships were converted to ratios, in which "accredited" agencies' values were equal to 1. For example, accredited agencies overall had 641 Category A standards applicable, compared to 589 for non-accredited agencies. When 589 was divided by 641, this produced a ratio of "non-accredited" to "accredited" of .92/1. The data for Chart 13 were obtained from Table 15 (Client numbers); Table 16 (Staff ratio, % Severe/Profound, % 18 years or less, and median years in operation); and from Table 17 (average number of previous surveys, average number of applicable "A" standards).

As the chart indicates, for all 186 agencies, there were not noticeable distinctions between accredited and non-accredited agencies in median staff ratio, percent of individuals served who were severely/profoundly retarded, percent of individuals 18 years or less, or median years in operation. Nor, as was indicated in Table 16, were any of these items consistent across agency types--they sometimes were positively, sometimes negatively related to accreditation success. (Although not indicated on Chart 13, Table 10 had indicated that overall staff-to-client ratios were slightly higher (1.07 to .93) for non-accredited agencies.)

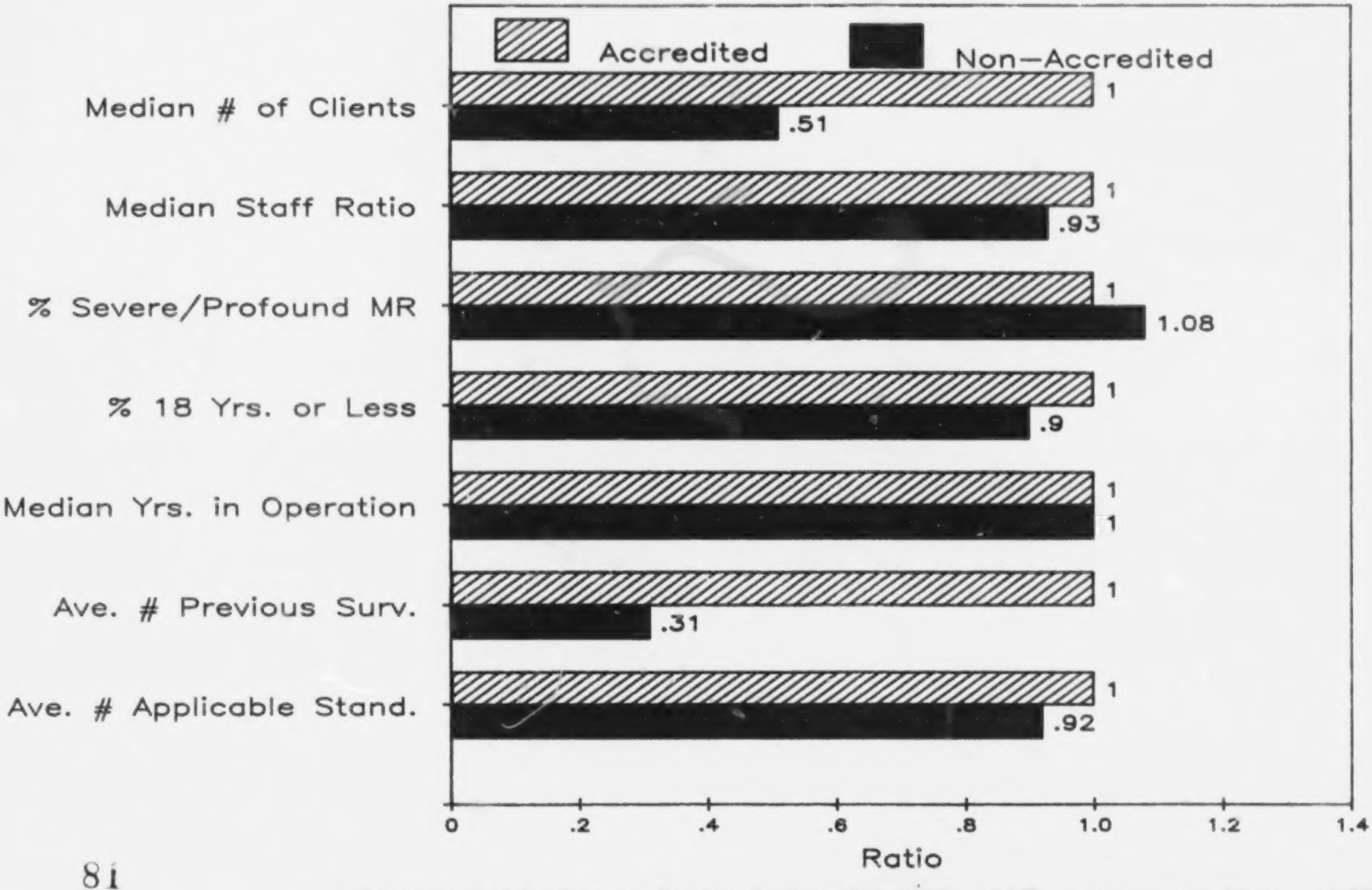
The only items which seemed to distinguish between accredited and non-accredited agencies within this group of 186 ACMRDD surveys were: median number of clients served and average number of previous surveys. However, median number of clients served was not consistently higher for accredited outcomes across all five types of agencies. The remaining item noted in Chart 13, the average number of applicable standards, was only slightly higher (9%) for the 131 accredited vs. the 55 non-accredited agencies. However, as was indicated in Table 17 above, the accredited agencies within all five categories had a higher average number of applicable Category A standards.

Items Appearing to Affect Accreditation

ACMRDD agencies surveyed in 1983-84 totalled 186. Eighty-one of these (44%) were agencies' first surveys (Table 18). Of the 55 non-accredited agencies, 40 (73%) were first surveys and the average number of previous surveys was .4 (Table 17). Since there were so many first-time surveys within the group analyzed, the influence of this possible relationship must be determined through future analysis. *Nevertheless, it would appear that any agency anticipating a first-time survey--or perhaps* ***any*** *agency going through a survey--should prepare by simulating the survey experience.* Such is the case with the current group of ACMRDD surveyed agencies.

CHART 13

Comparison of Selected Factors for 186 Surveys by ACMRDD, 1983–84



Source: Evaluation & Public Policy Program, ISDD, U of IL at Chgo, 1985.

A second item, the number of applicable "A" Standards, also was consistently higher for accredited agencies in all five categories. This might reflect the general nature of the ACMRDD standards and of the survey process. The Standards have evolved through a number of editions which began with a residential institution focus and which now includes many standards for a broad variety of residential and non-residential agency components. It would appear, however, that there may be some advantage to agencies which have a larger number of service components--which are more comprehensive.

Chart 12 above noted the significantly smaller median sizes of non-accredited agencies in 1983-84 compared to 1973-74. Whereas the agencies surveyed ten years earlier were primarily large public residential facilities with a median over-all size (including private agencies) of 396, the typical agency among the 186 recent surveys (Table 10) had a median client size of only 117, and a median of only 56 staff. With the large number of first surveys in the 186 agencies which were evaluated, it is difficult to determine whether agency size (numbers of staff and/or clients) was a factor affecting accreditation--as was suggested by the sample in 1973-74.

Critical Standards Identified

Many of the critical standards were concentrated, for all types of agencies, in the areas of Individual Program Planning and Implementation, and Individual Program Support. A large number of standards related, in some way, to the Interdisciplinary Process--the conceptualization, staffing, staff development, program management, record-keeping, communication and other aspects of this strategy for maximizing service provision to disabled individuals (Crosby, 1976; ACMRDD, 1984a). By analogy, when a non-disabled individual has a problem requiring professional care which is difficult to diagnose, he or she expects care at a hospital or at a medical center, where all the necessary professional resources are concentrated. The independent individual also expects that the various professionals who might contribute to a proper diagnosis and plan of care are available to consolidate their opinions in an interdisciplinary approach--arriving at the correct decisions quickly.

Many of the ACMRDD standards outline the requirements for the interdisciplinary process to occur for the disabled individual; however, this individual cannot himself seek the maximum combination of professional intervention. Therefore, many standards address the problems of effectively coordinating the contributions of professionals and other staff. When the interdisciplinary team approach works effectively, significant improvements on behalf of the disabled individual are attained. The approach fails when professionals and others simply go through the motions of meeting and planning--neglecting what is best for the person whose care is their responsibility.

It is the structure of the standards, the reputation of the Council and the training of surveyors which are designed to prevent the ACMRDD survey procedure itself from neglecting the most important aspects of care and training of disabled individuals. A charge which has been levelled against the ACMRDD survey is that it is prone to ineffective measuring of the ongoing effectiveness of a program, by over-emphasizing the numbers of professionals who might be needed to help direct an individual's program, rather than looking at program outcomes.

It was not within the scope of the Accreditation Project to assess the relationships between successful performance on ACMRDD standards and measures such as improved functioning of individuals served, increased movement through programs, etc. However, the project's analysis of critical standards identified a number of categories which related to program effectiveness, particularly in the sections "Individual Program Planning," and "Individual Program Support." The validity of the ACMRDD accreditation process must ultimately be evaluated at least in part by the relationship of standards to program outcomes.

Additional Research

Several lines of inquiry are suggested by the efforts of this project. They fall into one of two broad categories: a) subsequent analyses of the database generated by the present study; and, b) future research efforts that will complement the efforts of the ACMRDD surveys.

Subsequent Analyses. The intent of this initial report was descriptive; an extensive series of statistical analyses would likely have obscured the value of the basic descriptive information. Subsequent statistical tests of possible relationships can, however, be an important contribution. The descriptive information herein reported suggested a number of questions: a) what characteristics discriminate among types of agencies in the ACMRDD sample? b) what characteristics predict accreditation decisions? c) do critical standards tend to fall into predictable clusters and, if so, are the clusters different across agency types? and, d) is there systematic covariation among agency characteristics and the evaluation outcomes for specific categories of standards?

In statistical terms, each of the questions would best be addressed by imposing a multivariate model on the database. While each of the questions can be addressed with univariate analyses in a piece-meal fashion (i.e., variable by variable), the more comprehensive multivariate methods would better portray the reality of the accreditation process. For example, the proportion of severely and profoundly handicapped clients tends to be higher in the non-accredited agencies, and we may therefore infer that such agencies tend to be deficient in their program planning.

It would be premature, however, to draw conclusions about the role of severity of handicap, difficulty of programmatic accommodations and subsequent accreditation outcome without simultaneous consideration of other important characteristics. These would include the primary focus of the agency (large residential, small residential, non-residential), the proportion of other types clients, range of services offered, etc. Unfortunately, the sample size in some of the agency categories (e.g. small and large private residential and public non-residential agencies) is inadequate for most forms of multivariate methods. Estimates of the relative importance of variables would very likely be arbitrary. *Subsequent analyses, therefore, will necessarily be univariate until the database has been significantly expanded.*

Future Research Efforts

Recommendations for future study fall into four general areas: a) continued expansion of the database (sample size) so that more sophisticated analyses can be conducted; b) continued evaluations and detailed study of the small private agency category; c) analytic comparison of ICF/MR and ACMRDD standards; and, d) an empirical validation of the relationship between program effectiveness and ACMRDD accreditation outcome on specific standards and groups of standards. The problem of small sample size has been addressed above; the other three research efforts are summarized below.

Evaluation of Small Private Agencies. Given the increased number of smaller, private agencies which are now being surveyed by ACMRDD, it is important to continue to evaluate the performance of these programs in ACMRDD surveys. It is particularly important to better analyze factors which play a significant role in accreditation success. Other factors besides previous survey experience possibly related to accreditation outcome are median size of staff or clients, staff to client ratios, ownership, numbers of children served and other client characteristics. *The data seem to suggest a certain threshold, or minimum number of staff, which is necessary for an agency to effectively address the "comprehensiveness" aspect of ACMRDD Standards.*

ICF/MR Standards. Another area of suggested analysis is the closer comparison of ACMRDD standards to ICF/MR regulations, particularly in large public residential facilities. (All ACMRDD-accredited facilities in 1984 were at least partially ICF/MR certified.) Such an analysis might begin with a detailed comparison of standards such as suggested by Repp (1976), and it would involve a comparison of ACMRDD "non-compliance" with ICF/MR "deficiencies." *Given the generally similar nature of the ICF/MR and ACMRDD evaluation processes, it is difficult to understand why ACMRDD accreditation cannot be deemed by the Federal Government to serve in lieu of ICF/MR review.* The suggested study would squarely address the propriety of such an approach, drawing on the experiences of the states which have already deemed ACMRDD evaluation in lieu of state certification.

Validation. *Utlimately, the relationships of ACMRDD standards to measures of program effectiveness must be determined.* Once determined, the ACMRDD accreditation process would be a more valuable measure of a program's quality. For example, gross measures of program success for most types of programs surveyed by ACMRDD might in part relate to the subsequent placement of individuals served by that agency's programs. Or, perhaps within a given state or group of states, standard client assessment instruments such as the American Association on Mental Deficiency's Adaptive Behavior Scale could be utilized to provide scores for individual clients served. The scores would be aggregated for surveyed agencies, and then these aggregate scores would be compared to the agencies' performance on ACMRDD surveys. It would be particularly interesting to look at the different sections of the Standards to determine which, if any, exhibit significant covariance with such outcome measures.

Recommendations

To ACMRDD: One cannot complete a project like this one without respecting the professionalism and rigorous procedures which are embodied in the ACMRDD survey process. The application for survey, the survey itself, and the several stages of review and decision-making which follow involve considerable vigilance. In spite of the fact that most of the Survey Reports we reviewed pre-dated the Council's use of computers, there were few mistakes in those documents. It is a credit to ACMRDD headquarters staff and surveyors that such quality control could be maintained in the midst of the burgeoning number of surveys.

Recommendations to ACMRDD center around formats for data collection, and the Standards themselves. First, Project staff, in order to record the various data items, had to refer to three separate sections of the agencies' files: the A.A.S., the Survey Report, and the sheet listing applicable standards. The latter, we feel, should be consolidated with the Survey Report. (We commend the recent changes in the Survey Report's format which more effectively organize information about the service components at the agency, the numbers of individuals served, and information about previous surveys, etc.)

Secondly, the Application for Accreditation Survey should be modified to facilitate completion by the applicant agency, and to more consistently solicit relevant data. For example, the A.A.S. now has different tables related to service components, staffing and clients which should be consolidated. Consolidation would yield a more complete profile of the agency and of the clients served. We also recommend incorporation into the A.A.S. of an "information release" signature by the chief executive officer, granting ACMRDD permission directly--or through a research center--to utilize the agency's coded data for state-wide and national analyses.

The analyses of Category A Standards in this Report should prove beneficial to ACMRDD in its ongoing review of the Standards. The Council should consider carefully the Report's enumerations of "critical standards" and of "non-problematic standards" (i.e. those 162 standards with which all agencies appeared to be in compliance during 1983-84). Consolidation of some standards or of sub-sections may be possible. *We do not suggest, nor do we have the basis for suggesting, that the basic sections of the standards be modified. However, a smaller number of Category A standards over-all might increase the impact of those which remain, while greatly simplifying the administration of the survey.*

To Agencies Contemplating Survey: Recommendations to agencies relate to preparation for survey and to the review of critical standards. This Report is intended to provide individual agencies with a basis for comparing themselves to similar agencies, and to all ACMRDD surveyed agencies. In addition, the identification of critical standards should assist agency administrators and clinicians in the identification of priority areas for survey preparation and for staff development.

One indication from the current survey group of 186 agencies was that the single best preparation for an agency anticipating survey is to conduct a simulation of the actual survey experience. In other words, the effect of the factor "average number of previous surveys" seemed to indicate that agencies which have not yet been surveyed should review ACMRDD documents and participate in preparatory workshops; should talk to staff at agencies which have been surveyed; and, concentrate on the issues embodied in the "critical standards."

Issues identified by the critical standards include devoting careful attention to the establishment of good communication and record-keeping systems, and emphasizing vertical and horizontal communication in the agency (administrators to direct-care personnel; professionals to other professionals; direct-care staff to support services staff). Agencies also should attend to the proper incorporation of interdisciplinary teams into program planning and implementation for the individuals served. For example, the frequent citation of Standard 1.1.1, requiring "an Interdisciplinary Team" for each individual reflects the fact that many individuals in ACMRDD surveyed agencies are served by more than one agency--coordination is therefore a problem.

ACMRDD accreditation has had an impact on a significant number of agencies in the United States. In fact, more than 21% of all MR/DD persons residing in the nation's large public residential programs in 1984 were in ACMRDD accredited settings. Ten years ago, accreditation had been granted to only a handful of agencies, and only about 5% of the nation's MR/DD residents of large institutions were living in them. Besides agencies' acclimation to the rigors of the survey process, this reflects the greatly enhanced resource base enjoyed by large residential agencies today.

In spite of the much improved survey outcomes for agencies recently surveyed by ACMRDD, many still have difficulties with numerous standards in such areas as Individual Program Planning and Implementation, Achieving and Protecting Rights, and Individual Program Support. Although the number of agencies undergoing survey in the past ten years has been greatly expanded, and now includes significant numbers of small private programs, many of the field's most perplexing programmatic problems are common to agencies of all sizes and types. The manner in which ACMRDD accreditation serves to ameliorate these problems requires ongoing analysis.

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PART IV: APPENDICES

1. Application for Accreditation Survey (A.A.S.)
2. Survey Report Format
3. Sample Data Collection Format
4. Statistical Summary of Agency and Client Characteristics
5. Enumeration of Critical Standards
    a) Large Residential Agencies
    b) Small Residential Agencies
    c) Non-Residential Agencies
6. Ranking of Critical Standards for All Agencies
7. Ranking of Critical Standards in Order of ACMRDD Standards
8. 162 Standards With Which All Agencies Were Assumed to be in Compliance

APPENDIX #1

APPLICATION FOR ACCREDITATION SURVEY (A.A.S.)

This Appendix consists of a copy of the Application form which was utilized by ACMRDD for the surveys which were reviewed by this project. The items on this application provided the data on client and agency characteristics; standards were analyzed utilizing information contained in ACMRDD Survey Reports (see Appendix #2).

ac mrdd

ACCREDITATION COUNCIL FOR SERVICES FOR MENTALLY RETARDED AND OTHER DEVELOPMENTALLY DISABLED PERSONS
4435 Wisconsin Avenue, N.W., Washington, D.C. 20016
202/363-2811

APPLICATION FOR ACCREDITATION SURVEY
AS AN AGENCY
SERVING DEVELOPMENTALLY DISABLED PERSONS

Instructions

1. Before filing this Application, the administration and staff of the agency should be thoroughly familiar with the Standards for Services for Developmentally Disabled Persons and with the accreditation policies and procedures, including the survey eligibility requirements, that are detailed in the Standards.
2. Before entering any information, read the entire Application.
3. This Application cannot be processed unless each question is answered and all requested information is provided. If an item or question is not applicable, enter NA.
4. Enter all information as of the date of the Application.
5. If additional space is needed to provide the information requested, photocopy pages and attach them to the Application.
6. Make certain that all entries are legible and sufficiently dark for photocopying.
7. Return one original signed Application, and one clear copy. Retain third copy for your files.
8. The Application must be accompanied by a nonrefundable application fee of $500.00.

Agency Identification

Full name of agency ______________________________

Street address ______________________________

Mailing address if different ______________________________

City, state, zip code ______________________________

Telephone number ______________________________

Name and title of agency's chief executive officer

____

Name, title, telephone number, and address (if different from above) of person responsible for completing arrangements for survey

____

____

Agency identification number (to be assigned by the Council) ______________

1. Name of agency's governing body ____________________

   Name and title of head of governing body ____________________

   ____

2. If the agency is a unit of a larger organization:

   Name of organization ____________________
   Name and title of organization's chief executive officer

   ____

3. Year in which agency began operation ________
   Year in which agency began operation under present ownership or control ________

4. The agency is (check one): ___ governmental, ___ private not-for-profit, or ___ proprietary (for profit).

5. Does the agency provide services without limitation by reason of race, color, or national origin? ________

6. If the agency is licensed, in whole or in part (if agency has more than one license, give information for each license):

   Name of agency issuing license ____________________

   Licensing agency's mailing address ____________________

   ____

   License type or category ____________________

   Portion of agency covered by license ____________________

   Licensed capacity ____________ License number ____________

   License expiration date ____________ Date of last inspection ____________

7. Submit with this Application a map that identifies the geographic area covered by the service delivery system of which the agency is a part. What is the total population of this geographic area? ________

8. Age range of population served ________

9. List, by name, city or town, and types of services provided, other agencies in the service delivery system with which the agency works to provide the services required by the Standards:

   ____

   ____

   ____

   ____

10. Indicate whether the agency provides (is the source of) or obtains (from another source) the following services. Check both columns if a service is both provided and obtained. Indicate by NA services that are not needed by individuals served by the agency.

		Provided	Obtained			Provided	Obtained
1.2	Evaluation and assessment			4.6.5	Dental services		
1.4.1	Physical development and health services			4.6.7	Food services		
1.4.2	Services to enhance mobility			4.6.8	Legal services		
1.4.3	Habilitation, education, and training			4.6.9	Library services		
1.4.4	Work and employment services			4.6.10	Medical services		
1.4.5	Leisure time services			4.6.11	Activity therapies		
1.4.5	Recreation services			4.6.12	Nursing services		
1.4.6	Services to modify maladaptive behavior			4.6.13	Occupational therapy services		
2.2	Homemaker services			4.6.14	Optometric services		
2.2	Sitter/Companion services			4.6.15	Pharmacy services		
2.3	Temporary-assistance living arrangements			4.6.16	Physical therapy services		
2.4	Surrogate family services			4.6.17	Podiatric services		
2.5	Congregate living services			4.6.18	Psychological services		
3.2.1	Citizenship training			4.6.20	Religious services		
3.2.2	Personal advocacy services			4.6.21	Social work services		
3.2.3	Agency advocacy			4.6.22	Speech and language pathology services		
3.3	Protective services			4.9	Volunteer services		
3.3	Guardianship services			6.	Research		
4.2	Case finding			7.2	Resource information services		
4.4	Follow-along services			7.2	Data documentation services		
4.5.1	Home training services			7.3	Community education		
4.5.2	Family education services			7.4	Preventive services		
4.6.4	Audiological services			7.5	Manpower development		

11. Assign consecutive "component numbers" to each address at which the agency provides services. Assign component number 1 to the address of the office of the chief executive officer. For each component number, indicate: the address and the programs operated at or from that address; the days and hours of operation of each program; the number of staff assigned to each program (including the full-time equivalent of part-time staff); and the average number of individuals served by each program during the preceding calendar month at the address stated, at the individuals' homes, and at other agencies. Under each component number from 2 on, indicate the approximate travel time from component number 1. If components are numerous and widely separated, please attach a diagram showing the approximate travel times between components.

Component number	Component address and programs operated at or from address	Days and hours of operation	Number of staff	Average number of individuals served during preceding calendar month		
				At agency	At individual's homes	At other agencies

12. If the agency operates temporary-assistance living arrangements or congregate living services, enter the information requested. Use the component numbers assigned in item 11. List each building and each living unit within each building. For each living unit indicate: the number of residents, by sex; the number of nonambulatory residents; the most common primary disabilities (autism, cerebral palsy, mental retardation, seizure disorders); and the age range of the residents. At the bottom of the chart, enter the total number of buildings, living units, male and female residents, and the total age range.

Component number	Building	Living unit	Number of residents		No. non-amb.	Most common disabilities	Age range
			Male	Fem.			
Totals							

13. List each building utilized by the agency that is not listed in item 12. Use the component numbers previously assigned in item 11. State the name or other identifier of each building and describe the building's use.

Component number	Building	Use

14. Enter the information requested below to indicate the number and disabilities of the individuals served by the agency. Individuals with more than one disability are to be counted in every column that applies to them.

Severe autism means exhibiting extreme forms of self-injurious, repetitive, aggressive, or withdrawal behaviors; extremely inadequate social relationships; or extreme language disturbances.
Mild cerebral palsy means impairment only of fine precision of movement.
Moderate cerebral palsy means that gross and fine movements and speech clarity are impaired but performance of usual activities of living is functional.
Severe cerebral palsy means inability to perform adequately usual activities of daily living such as walking, using hands, or using speech for communication.
Mental retardation levels (mild, moderate, severe, and profound) are as described in the American Association on Mental Deficiency's Manual on Terminology and Classification.
Nonambulatory means unable to walk independently.
Mobile nonambulatory means unable to walk independently, but able to move from place to place with the use of such devices as walkers, crutches, wheelchairs, and wheeled platforms.
Nonmobile means unable to move from place to place.
Hard of hearing means able to understand speech only with amplification.
Deaf means unable to understand speech even with amplification.
Impaired vision means acuity of 20/70 or less in better eye with correction.
Blind means corrected acuity of 20/200 or less in better eye or visual field of 20 degrees or less.

	Sex			Disabilities Autism		Cerebral Palsy			Mental Retardation			
Age	Male	Female	Total	Mild or Moderate	Severe	Mild	Moderate	Severe	Mild	Moderate	Severe	Profound
Below 6												
6-18												
Over 18												
Total												

	Disabilities (continued) Nonambulatory		Seizure disorders		Hearing impairment		Vision Impairment		Other (specify)			
Age	Mobile	Non-mobile	Controlled	Not controlled	Hard-of Hearing	Deaf	Impaired	Blind				
Below 6												
6-18												
Over 18												

Comments and explanations

Use this space to explain or comment on any of the preceding items. Indicate the item number to which each comment or explanation refers. Attach additional pages as necessary.

IMPORTANT NOTE: The survey fee in effect at the time that this application is submitted will apply to the survey if it is conducted within 6 months following receipt of the application or if the survey is postponed by AC MRDD. If the survey is postponed, at the agency's request, beyond 6 months following receipt of the application, the fee in effect for applications received at the time that the survey is conducted will apply.

Certification

The undersigned hereby applies to the Accreditation Council for Services for Mentally Retarded and Other Developmentally Disabled Persons for accreditation survey of the named agency, agrees to pay the established survey fee, and grants permission to licensing agencies and any other relevant examining or reviewing agency or group to release official records and information concerning the named agency to the Accreditation Council for its consideration in the accreditation of the agency. It is understood and agreed that the agency is obligated to pay the survey fee unless the agency's written request to cancel the survey is received by the Accreditation Council prior to the Council's issuance of written notice to the agency of the dates on which the survey is to be conducted, or is received by the Accreditation Council at least 45 calendar days prior to the date on which the survey is to begin, as stated in the Council's written notice to the agency.

Full name of agency ______________________________

Signature of agency's chief executive officer ______________________________

Date of application ______________________________

APPENDIX #2

SURVEY REPORT FORMAT

This Appendix is a copy of a typical Survey Report prepared by ACMRDD surveyors. It represents the formal transmittal of the accreditation decision to the agency surveyed. This particular agency was a "small private residential" agency which provided a variety of residential, vocational and other special services. The first page of the Survey Report includes an outline for summarizing agency services, client ages and functional characteristics, agency location and previous survey information. Page 2 of the sample Survey Report summarizes the ACMRDD accreditation process, method of reporting survey findings, and number of applicable Category A standards. Page 3 presents a basic description of the agency surveyed, and concludes with a paragraph (Page 4) indicating the accreditation decision. In this example, the agency received 2-year accreditation contingent upon certifying (within 30 days) that it had corrected a life-safety deficiency.

Pages 5-14 of the Survey Report list all standards with which the agency was found not to be in full compliance. Category A standards are indicated with an asterisk (*), and an (R) denotes "repeat" deficiencies--standards with which the agency also did not comply on its most recent survey. On the right-hand side of each page, opposite the listing of the Standards by number, the Report includes a summary of the surveyors' findings, documenting why the agency was in less than full compliance with each of the standards.

APPENDIX # 2

Page 1

Accreditation Council for Services for Mentally Retarded
and other Developmentally Disabled Persons (AC MRDD)

SURVEY REPORT

Survey Dates: **Surveyors:**

Agency Description

Types of Services Provided:

Residential: 4 group homes serving 8 individuals each, including 1 home for individuals who are dually diagnosed; and a "sheltered" home serving 5 women who require minimal supervision.

Day programs: home-based infant stimulation program providing training and supportive services to children under the age of four and their families; work activity center and sheltered workshop providing basic skills, pre-vocational and vocational training, including contract work and janitorial services. The agency also operates the a local restaurant, and employs a few clients part-time.

Total number of individuals served at time of survey: 82

Ages:
below 6: 20
6-18: 0
over 18: 62

Number of individuals reported by level of mental retardation:
mild: 22
moderate: 24
severe: 16
profound: 2
developmentally delayed: 16
borderline: 2

Other disabilities: seizure disorders, 11 individuals; cerebral palsy, 8 individuals; vision impairments, 4 individuals; hearing impairments, 2 individuals.

Number not ambulatory: 13

Number of individuals also served by other agencies: 1 individual resides in a foster home contracted by a state agency.

Location: administrative offices, including infant program and vocational training sites, in the city of All residences integrated into residential communities.

Previous Survey(s): , , , and ; accredited for two years on each occasion.

Introduction

AC MRDD's Standards for Services for Developmentally Disabled Individuals contain approximately 1500 discrete requirements called "standards." These are intended to cover, in the aggregate, every kind of service for persons with developmental disabilities. Not all of the 1500 standards are applicable to a given agency, though most of them are applicable to an agency that provides comprehensive, including residential, services. About 800 of the 1500 standards have been identified by AC MRDD's Board of Directors as being those on the basis of compliance with which accreditation decisions will be made. These are called "Category A" standards.

Prior to receiving an on-site survey, an agency must perform, and report to AC MRDD the results of, a self-assessment of its compliance with every standard that is applicable to it. The agency must also explain the nonapplicability of every standard for which such status is not self-evident on the basis of the services that the agency does and does not provide. This self-survey report is the main information base used by AC MRDD surveyors in conducting the on-site survey.

During a survey of feasible duration and cost, the surveyors cannot assess compliance with every standard that is applicable to an agency. Consequently, the surveyors mainly limit their attention to the Category A standards. The reported self-assessments of the agency with the Category A standards applicable to it are addressed by the surveyors as hypotheses to be tested. Finding evidence that all requirements of a standard are not met in any instance in which it is applicable results in a determination by the surveyors of "less than full compliance" with it. Failure to find such evidence results in acceptance of the agency's report that it fully complies with the standard.

To be eligible for accreditation, an agency must not be found by AC MRDD's surveyors to be in less than full compliance with more than 15% of the Category A standards that are applicable to it. Because of the rigorous, hypothesis-testing approach that the surveyors employ, only those standards with which the surveyors have determined an agency to be in less than full compliance are ordinarily listed in its survey report. Obviously, the agency's report of compliance with a vastly larger number of standards has been accepted by AC MRDD.

Readers of a survey report who are unacquainted with AC MRDD's rigorous survey procedures, as described in its standards document and survey questionnaire, may receive a mistaken impression from the report's listing of deficiencies found. The fact is that an agency accredited by AC MRDD has been found to be in substantial compliance with by far the most comprehensive and demanding standards applied to agencies serving developmentally disabled persons. This fact should be made clear to persons who read the survey report.

Survey Findings

This Survey Report summarizes, and presents some examples of, the surveyors' findings that were discussed with the agency's staff during the survey's Summation Conference. The report indicates all Category A standards (indicated by asterisks) and certain other standards with which the agency was found to be in less than full compliance. Standards with which the agency was also found to be in less than full compliance on the previous survey are indicated by (R).

As AC MRDD surveys focus on the delivery of services to the individuals served, a sample of individuals served is used to assess compliance with a large number of standards. Many of the references in this report are to evidence of less than full compliance found in conducting program audits on the individuals selected to be in the sample. The surveyors conduct these audits by reviewing the records of these individuals and then observing their status and programs. Reference to "an" or "one" individual means one individual about whom information was gathered by the

PAGE 3

surveyors, usually through an audit of that individual's program. "Only one individual" would be used if the surveyors should somehow determine that the information reported applied only to one individual served by the agency, rather than to only one of the individuals reviewed by them. "A few," "some," "several," "many," and similar expressions are used, when warranted, to suggest the extent to which a deficiency was found. But such words are used within the context of the sampling procedure. The survey procedures have been designed to facilitate reliable surveys of manageable time and expense. The procedures do not presume to result in precise determination of degrees of compliance or non-compliance.

Number of Category A standards applied: 625

Summary and Conclusions

The administration and staff of
are commended for their dedication to providing the services needed by the individuals served, for their continued participation in the accreditation process, and for their openness and cooperation during the survey. The agency is also commended for the high regard for its services expressed by relatives of the individuals served and representatives of other agencies knowledgeable about the agency's Services who attended the survey's Public Information Interview. Representatives of the public complimented the ability of the staff to "pull together" in spite of the loss of the agency's Executive Director for several months last year, and to maintain continuity in the delivery of services to individuals during that time; its integration of individuals served into the community; its aggressive actions in obtaining several diverse grants and funding sources; and its ability to solicit opinions from parents and to keep families informed. The

was the first community-based accredited agency and as a result of its outstanding leadership and board, set an example for other agencies to pursue accreditation. "It is a forerunner, progressive, model, a fine example....the state office is very much delighted."

To further improve its services, and to retain accreditation, the agency should correct all correctable deficiencies cited in this report, with special emphasis on those that were also cited in the report of the previous survey and that are identified by (R). Deficiencies related to 22 category A Standards were found on both this and the previous survey (this number includes standards determined by surveyors to be redundant with other standards cited). Deficiencies related to an additional 57 category A standards not noted on the previous survey were found during the present survey. In addition, 2 category A standards found to be in less-than-full compliance during the previous survey were not found on the present one.

It is hoped that the comments and recommendations in this report will be helpful to the agency as it continues its efforts to upgrade the quality of its services to individuals who are developmentally disabled.

Reference is made throughout this report to the Standards for Services for Developmentally Disabled Individuals. The standard numbers listed indicate standards with which the agency was found to be in less than full compliance. Category A standards are indicated by an asterisk (*).

PAGE 4

Decision by Accreditation Committee of the Board of Directors, February 22, 1985:

Reaccreditation for two years, subject to the conditions stated in the Council's Accreditation Policies and Procedures, and subject to the further condition that the agency submit within 30 days following the above date certification that the deficiencies in compliance with the standard cited in paragraph number 48 of this report have been corrected.

PAGE 5

Details of Findings

Standards with which agency was found to be in less than full compliance	Recommendations and comments regarding agency's compliance with the standards
	In order to achieve compliance, the agency should:
1. Individual Program Planning and Implementation	
1.1 The Interdisciplinary Process	
1.1.2*	1. assure that persons needed to identify the individuals' needs, and design programs to meet them, are on the individuals' interdisciplinary teams (IDTs). Physicians who prescribe drugs for behavior management, psychologists or behavior management specialists, mental health counselors, and physicians, occupational and speech therapists have not participated on some individuals' IDTs when needed.
1.2 Evaluation and Assessment	
1.2.8.3* 1.2.8.6.1* 1.2.8.7* 1.2.9.2*(R) 1.2.10*	2. provide or obtain the assessments indicated, including specialized assessments when necessary. No medication history was found in the record of a recently admitted individual reviewed by the surveyors; when auditory and visual screenings were more than a year old, annual reports of physical examinations did not include reports of auditory or visual acuity; a comprehensive auditory exam of one individual had not been conducted, although the individual had failed an auditory screening provided in March, 1983, that suggested the individual had a "mild loss in both ears"; some individuals had not received speech and language screenings; and no psychiatric evaluations were found for many individuals said to have "psychosis" and who were receiving psychotropic medications.
1.2.12.4*	3. obtain dental examinations annually. The last exam for one individual reviewed was in April of 1982.
1.2.16* 3.1.13*	4. obtain appropriate written permission prior to releasing assessment information and discontinue the practice of securing "blanket" consents. Assessment results of one individual reviewed were sent to the referring agency, the County Health Department, in May, 1984, without the written consent of the child's parents. "Blanket" consents that authorize the release of

PAGE 6

names and photos found in individuals' records should be replaced with specific and individualized consents.

1.3 The Individual Program Plan

1.3.1.1*

5. develop initial individual program plans (IPPs) within 30 calendar days after enrollment. The plan for one individual enrolled on February 23, 1984, was not developed until April 5, 1984.

1.3.2*(R)

6. continue efforts to convene complete teams. In addition to the persons listed in comment number 1, a house manager for one individual has not attended.

1.3.3*(R)
1.3.3.1*

7. rewrite goals that do not describe, in behavioral terms, a future result or condition to be accomplished through pursuit of a series of objectives, as required by the Standards and described in its Glossary. Some goals reviewed by the surveyors, such as "increase production skills" and "will eliminate maladaptive personal behavior," were too general and not outcome-oriented. No objectives related to behavior management, speech and occupational therapy, vocational, independent living, or self-help skills training were found in the plans of some individuals for whom these have been identified as needs.

1.3.3.2.3*(R)

8. rewrite the limited number of objectives that are not expressed in behavioral terms, such as "will relate in a proper manner with co-workers in a work setting to the satisfaction of the trainer."

1.3.7*
1.3.7.1*(R)

9. continue to modify the computer program used for the monthly reviews so that there is a continuous self-correcting system for effective review of the entire plan, including behavior management programs and the status of services rendered or needed. Although the agency's data collection system is behaviorally orientated, progress toward some objectives is summarized inaccurately and inconsistently with respect to the criteria stated or are merely approximations of degrees of success, stated as percentages.

1.3.7.3*

10. reconvene the individuals' IDT, when necessary, rather than having the physician make significant decisions concerning restrictive behavior management interventions, such as the use of drugs for behavior management. In addition, one individual whose program was reviewed accomplished

the sole training objectives in the plan assigned to staff in the living unit in June, 1984, but the team did not reconvene to review the plan and add new objectives. (See also comment number 29.)

1.4 Individual Program Implementation

1.4.1 Physical Development and Health

1.4.1.4*

11. provide or obtain services needed for the treatment of sensorimotor deficits. One individual who has cerebral palsy, whose program was reviewed by the surveyors, received an occupational therapy evaluation in November, 1982, recommending use of a Winsford feeder to facilitate the individual's independence in self-feeding. At the time of the survey this adaptive equipment nor an alternative feeding program was incorporated into the individual's program plan.

1.4.1.5.1*

12. obtain reevaluations as needed. One individual reviewed by the surveyors wears a hearing aid that has not been reevaluated for a number of years, although the recommendation was to reevaluate every 6 months.

1.4.1.6*

13. obtain an evaluation and treatment by an oral surgeon for the individual for whom the local dentist has had little, or no success in treating the individual and who recommended in March, 1984, follow-up by an oral surgeon.

1.4.1.7.2.1*(R)

14. develop an accurate diet plan for an individual with a blood pressure problem whose record indicates that a low-salt diet had been prescribed, but whose recent nutritional evaluation did not include a blood pressure reading and was, therefore, placed on a regular diet.

1.4.1.11.1*

15. add to its policies and procedures on medication administration information concerning self-administration. The agency allows self administration, but it does not indicate how it determines who shall self-administrator, although several individuals do.

1.4.1.19.2*(R)

16. continue its efforts to record individuals' responses to medications dispensed by recording whether each drug is having its intended, or any other effect.

1.4.1.20*
1.4.1.21*

17. develop procedures for detecting signs of injury, disease, and abuse and procedures to be followed in medical emergencies and in rendering emergency medical care.

1.4.2 Mobility

No deficiencies noted.

1.4.3 Habilitation, Education, and Training

1.4.3.2.2*
1.4.3.2.3*

18. include in each training program the methods to be used and the training schedule. Some programs, for example, specify a "canned curriculum" that does not include methods for vocational objectives. Many plans do not include the specific training schedule but merely state daily or weekly.

1.4.4 Work and Employment

1.4.4.3.4*

19. interpret and utilize the results of comprehensive assessments provided. The information available is in raw data form, not interpretated in a meaningful way, and not utilized to determine appropriate training and employment.

1.4.4.4.2*

20. maintain work records that address more than the number of hours worked or number of pounds produced, to which records are now limited, and that can be used for program planning, in addition to determining payments.

1.4.4.6.2*
1.4.4.6.4*

21. pursue additional training opportunities for individuals served. Several individuals have highly developed skills, according to reports in their records and staff comments, but no jobs have been identified with training opportunities leading toward successful completion. On-the-job janitorial training for a few individuals is being provided at a few locations within the area, but such training is not organized to lead to a specific job placement.

1.4.5 Recreation and Leisure

No deficiencies noted.

1.4.6 Behavior Management

1.4.6.1.1*
1.4.6.6*

22. develop a policy concerning behavior management programs; add to its current behavior management policies directions regarding how to apply, as needed, a succession of methods to achieve results including the use of drugs for behavior management presently allowed, but not included.

1.4.6.8*(R) 1.4.6.8.2*(R) 1.4.6.10.1*(R) 1.4.6.10.1.1*(R) 1.4.6.10.1.2* 1.4.6.10.1.4.1*(R) 1.4.6.10.1.4.2*(R)	23. develop and implement effective behavior management programs that meet the requirements stated in the standards for all individuals who receive drugs for behavior management, and involve the prescribing physician to whatever extent is possible. (See also comments number 1 and 6.) The record of one individual placed on drugs for behavior management in July, 1983, for verbal aggression, does not document prior use of any other methods to address the behavior.
1.4.6.8.1.2* 1.4.6.8.1.4*	24. update plans for several individuals with maladaptive behavior specifying the methods to be used and the persons responsible. Although the program of one individual reviewed included methods, staff assigned the individual to do extra chores, not included in the program when the individual exhibited the target behavior. Several persons are designated as implementors or overseers of programs, but no one person is specified to have overall responsibility for each program.

1:5 Individual Program Coordination

1.5.2.1*(R) 1.5.2.2*	25. assure that the person responsible for coordinating the individual's program attends to all necessary details, including those identified as problems in this report (see especially comments number 1-14, 16, 18-21, 23, and 24).

1:6 Programming Records

1.6.5.2*(R) 1.6.5.3*(R)	26. review and correct records as needed. Several entries in records reviewed by the surveyors were undated, unsigned, or unauthenticated.

2: Alternative Living Arrangements

2:1 Attention to Normalization and Use of Least Restrictive Alternatives

2.1.13.4* 2.5.1.3.9*	27. provide sufficient and accessible storage space for individuals' clothing. Two individuals who reside at have no place for hanging clothing in their rooms and therefore hang their clothes on a clothes rack in the entryway to the home. In addition, two individuals who use wheelchairs are unable to reach their clothing because the closets were not designed for use by individuals in wheelchairs.

2.2 Homemaker and Sitter/Companion Services

2.3 Temporary-Assistance Living Arrangements

2.4 Surrogate Family Services

No pertinent standards.

2.5 Congregate Living Services

2.5.1 The Congregate Living Environment

2.5.1.3.8* 28. provide at least 60 square feet per resident in each multiple bedroom. One twin bedroom in the measures 110 square feet. (It is noted, however, that since the last survey the agency has built a second bathroom in this home and consequently space was taken from this bedroom.)

See also comment number 27.

2.5.2 Staffing and Staff Responsibilities

2.5.2.1.1* 29. consistently create opportunities whereby living-unit staff can train residents in needed skills. No training of one individual reviewed by the surveyors was assigned to living unit staff and the individual mentioned in comment number 10 had not had training in the living unit for 7 months.

3. Achieving and Protecting Rights

3.1 Attention to Individual Rights and Responsibilities

3.1.4* 30. assure due process in the use of drugs for behavior management by using such drugs only in accordance with plans that are developed by appropriately constituted IDTs, including the prescribing physician, and that are reviewed and approved by behavior management and human rights committees (see comment number 23).

3.1.7.1*
3.1.7.4 31. change the membership of the human rights committee to include individuals served, and no more than one-third of the members should overlap with the members of the agency's behavior management committee. Currently, on a six-member committee, individuals served are not included and three individuals also serve on the behavior management committee. In addition, two of the three individuals mentioned above are also interdisciplinary team members.

3.1.12*(R) 32. avoid mention of an individual's name in another individual's record, and insure that names crossed out with "white-out" are thoroughly obscured; this was not the case in many records reviewed.

3.1.16*

33. encourage individuals served to make frequent and informal visits home. Current agency policy states "visits will be limited to one weekend very other month and holiday visits will be limited to one week." Agency staff report that this is because of funding requirements.

See also recommendation number 4.

3.2 Advocacy

3.2.1 Self-Representation

3.2.1.1*

34. provide or obtain a citizenship training program that includes, as appropriate, the content suggested by standards 3.2.1.1.1 through 3.2.1.1.5.

3.2.2 Personal Advocacy

3.2.3 Agency Advocacy

3.3 Protective Services

No deficiencies noted.

4. Individual Program Support

4.1 Agency Philosophy, Policies, and Procedures

4.1.1.1*(R)
4.1.4
4.1.4.1(R)

35. further implement the principle of normalization by attending to such matters as staff referring to adult females as "girls," and eliminating use of housemanagers as houseparents; "mentally retarded," "handicapped," "developmentally disabled," and "physically and mentally handicapped," as nouns in the agencies brochures and in many of its policies; removing signs in the Whiteville group home that read "exit" and the sign in the work activity center that reads "day care," but is a place where individuals are engaged in work; reorganizing the use of the space in the South Main Street home so the staff office is not in the center hallway; and eliminating terms such as "staff assisted with the handicap" and "long-term case" in describing individuals in reports. It is noted that the agency actively encourages adult behavior, and that its services are very normalized.

4.2 Case Finding

No deficiencies noted.

4.3 Entry, Admission, and Discharge

4.3.9.2*	36. consider all admissions to the agency temporary, rather than as "long-term cases" projecting "lifetime placement," as was found for a few individuals reviewed by the surveyors.

4.4 Follow Along

4.5 Family-Related Services

4.5.1 Home Training Services

4.5.2 Family Education Services

No deficiencies noted.

4.6 Professional Services

4.6.1*	37. provide or obtain the evaluations and the speech and occupational therapy, behavior management, and vocational services needed by some individuals. (See comments number 2, 11, 21, and 23.)
4.6.2*	38. provide a longer work day for individuals for whom full-day vocational services would be appropriate, but who are currently receiving such services for no more than five hours per day.

4.7 Staffing and Staff Qualifications

No deficiencies noted.

4.8 Staff Training

4.8.1.6* 4.8.1.7* 4.8.1.9* 4.8.2.1* 4.8.2.2* 4.8.2.3*	39. provide formal training to assure that all staff members have the information and skills needed to carry out their assignments. The agency's current staff training program does not include some of the topics listed in the Standards, and some staff members have not received the training that is offered.

4.9 Volunteer Services

No deficiencies noted.

4.10 Governance and Management

4.10.1 Governing Body and Administration

4.10.1.9.5*	40. keep minutes of the behavior management and

human rights committees. No minutes have been kept since December, 1982. Since that time, the committees "sign off" on individuals' behavior management plans kept in the individuals' records.

4.10.1.13*	41. develop and implement a plan for a management audit that addresses implementation of the agency's stated policies and procedures and their compliance with laws and regulations.

4.10.2 Fiscal Affairs

4.10.2.5*	42. develop a system for internal inventory control for large items exceeding $300.00, as recommended in the 1982-83 fiscal audit.

4.10.3 Personnel Policies

No deficiencies noted.

4.10.4 Documentation

4.10.4.2.5*	43. add information regarding reason for entry to the many records that now lack it, rather than stating, for example, "socialization" or "deinstitutionalization."
4.10.4.4*	44. provide an accurate diagnosis of each individual served. One individual's record reviewed reflects more than one diagnosis.

4.11 Program Evaluation

4.11.1*	45. establish a program evaluation process that measures the agency's performance against its stated goals and objectives, and that assesses the effectiveness of the agency's programs in terms of the progress of individuals served toward the objectives specified in their IPPs.

4.12 Provision and Maintenance of Facilities and Equipment

4.12.1*	46. provide sufficient space in the workshop and appropriate environments in the "sheltered" home and group home. The workshop is somewhat overcrowded, which results in individuals working in limited space, and both homes are in need of repairs, e.g., peeling paint and wallpaper, missing handle on refrigerator door, leaking faucets, and replacing bedspreads used as curtains. Agency staff report that they are exploring additional space for the workshop and the South Main Street home will be replaced with new construction scheduled to open in March, 1985. In addition, the home at

Street, now serving eight men, will also be replaced. Projected completion date is July, 1985.

5. Safety and Sanitation

5.3.3.5*

47. include information concerning any problems encountered and corrective actions needed in reports of evacuation drills. Some reports reviewed by the surveyors did not indicate corrections to be made when problems were encountered, such as when an individual "went out the wrong door twice."

5.4.2*

48. take the necessary action so that the pipes on the floor in the "Cafe" do not present a "trip" hazard; install lights on the stairwell to the basement in the "sheltered" home; store clothing and papers in the basements of the "sheltered" home and South Main Street group home that are now "loose" around the basements; and reorganize boxes in the stairwell so they are not potential obstacles to escape routes.

5.6.3*

49. store internal and external drugs on separate shelves or in separate cabinets. Internal and external drugs for one individual were found stored together.

6. Research and Research Utilization

No deficiencies noted.

7. The Agency in the Service Delivery System

7.1 Coordination

7.1.6*

50. participate in an annual review of its standards. Agency staff report that they meet with other agencies periodically and do what is required informally.

7.2 Resource Information and Data Documentation Services

No pertinent standards.

7.3 Community Education and Involvement

7.4 Prevention

7.5 Manpower Development

No deficiencies noted.

APPENDIX #3

SAMPLE DATA COLLECTION FORMAT

The following four-page Appendix consists of a copy of the Project's data coding form. The form was utilized in the early stages of the Project, and represents the categories of data which were entered on the microcomputer. After an initial trip to the ACMRDD headquarters, staff entered data directly into the microcomputer, utilizing an automated spreadsheet program which was organized in a manner similar to the data coding form.

The first page of the form essentially represents the data elements available from the A.A.S. form (Appendix #1). Pages 2-4 of the form enumerate all of the Category A standards from the ACMRDD document. The numerical coding of deficiencies from ACMRDD Survey Reports (Appendix #2) consisted of making entries for each standard with which the agency was in less than full compliance.

APPENDIX # 3

AC MRDD CODE # ________ SURVEY DATES ________ YEAR BEGAN OPERATION ______
GOVERNMENTAL _______ PRIVATE, NOT-FOR-PROFIT _______ PROPRIETARY _______
AGE RANGE OF POPULATION SERVED ______________

LICENSURE: STATE:	______________	(type) ____	(%age)	PREVIOUS SURVEYS	____
	______________	(type) ____	(%age)		____
	______________	(type) ____	(%age)		____
LOCAL:	______________	(type) ____	(%age)		____
	______________	(type) ____	(%age)		____
	______________	(type) ____	(%age)		____
OTHER:	______________	(type) ____	(%age) describe		____

AVERAGE # SERVED DURING PRECEDING MONTH:

AT AGENCY	AT INDIVIDUALS' HOMES	AT OTHER AGENCIES	#STAFF	DAYS/HRS OF OPERATION

TEMPORARY-ASSISTANCE OR CONGREGATE LIVING TYPES:

LIVING UNIT SIZE:	#MALE	#FEMALE	#NON-AMB.	MOST COMMON DISABILITIES	AGE RANGE

AGE:	BELOW 6	6 - 18	OVER 18	TOTAL
MALE				
FEMALE				
DISABILITIES				
AUTISM				
MILD/MOD				
SEVERE				
C.P.				
MILD/MOD				
SEVERE				
M.R.				
MILD/MOD				
SEVERE				
PROFOUND				
NON-AMB.				
MOBILE				
NON-MOBILE				
SEIZURES:				
CONTROLLED				
NON CONTROL				
HEARING:				
HARD/HEAR.				
DEAF				
VISION:				
IMPAIRED				
BLIND				
OTHER				(SPECIFY:

SURVEY RESULTS: 2-YEAR ACCREDITATION _______ 1-YEAR ACCREDITATION _________
DEFERRED (TIME) _________ OTHER _________
NOT ACCREDITED _________

I.D. PROCESS-ALL
1.1.1
1.1.2
1.1.2.1
1.1.2.2
1.1.3
EVAL. & ASSESS.-ALL
1.2.1
1.2.2.1
1.2.3
1.2.4
1.2.5
1.2.6.1
1.2.6.2
1.2.6.3
1.2.6.4
1.2.6.5
1.2.6.6
1.2.6.7
1.2.7.1
1.2.7.2
1.2.7.3
1.2.7.4
1.2.8.1
1.2.8.2
1.2.8.3
1.2.8.4
1.2.8.5
1.2.8.5.1
1.2.8.6
1.2.8.6.1
1.2.8.7
1.2.8.7.1
1.2.8.8
1.2.8.9
1.2.9.2
1.2.9.3
1.2.10
1.2.10.1.1
1.2.10.1.2
1.2.11
1.2.11.1
1.2.12.1
1.2.12.2
1.2.12.3
1.2.12.4
1.2.13
1.2.14.1
1.2.14.2
1.2.14.3
1.2.15
1.2.16
I.P.P.-ALL
1.3.1
1.3.1.1
1.3.1.2
1.3.2
1.3.2.1.1
1.3.2.1.2
1.3.2.1.3
1.1.3.2.1.4
1.3.3
1.3.3.1
1.3.3.2.1
1.3.3.2.2
1.3.3.2.3
1.3.3.2.4
1.3.3.2.5
1.3.4
1.3.5
1.3.6
1.3.7
1.3.7.1
1.3.7.3
1.3.8
1.3.8.1
1.3.8.2
1.3.8.3
1.3.8.4
1.3.8.5.1
1.3.8.5.2
1.3.8.5.3
1.3.8.5.4
IPP IMPLEM.-ALL
1.4.0.1
1.4.0.2
1.4.0.3
1.4.0.4
1.4.0.5
PHYS. DEV.& HEALTH-ALL
1.4.1.1
1.4.1.2
1.4.1.3.1
1.4.1.3.2
1.4.1.3.3
1.4.1.4
1.4.1.5
1.4.1.5.1
1.4.1.5.3
1.4.1.5.3.1
1.4.1.5.3.2
1.4.1.5.3.3
1.4.1.5.3.4
1.4.1.6
1.4.1.6.5.1
1.4.1.6.5.2
1.4.1.7.2.1
1.4.1.7.2.2
1.4.1.7.3
1.4.1.8
1.4.1.8.1
1.4.1.9
1.4.1.10
1.4.1.10.1
1.4.1.10.2
1.4.1.10.3
1.4.1.11
1.4.1.11.1
1.4.1.11.2
1.4.1.11.3
1.4.1.12
1.4.1.13
1.4.1.14
1.4.1.15
1.4.1.16
1.4.1.17
1.4.1.17.1
1.4.1.18
1.4.1.19
1.4.1.19.2
1.4.1.20
1.4.1.21
1.4.1.21.1
1.4.1.22
MOBILITY-ALL
1.4.2.1
1.4.2.2
1.4.2.2.1
1.4.2.3
1.4.2.3.1
1.4.2.3.2
1.4.2.3.3
1.4.2.3.4.1
1.4.2.3.4.2
1.4.2.3.4.3
1.4.2.5
1.4.2.6
1.4.2.7.2
1.4.2.7.3
1.4.2.7.4
1.4.2.7.6
HAB, ED. & TRNG-ALL
1.4.3.1
1.4.3.2.1
1.4.3.2.2
1.4.3.2.3
1.4.3.2.4
1.4.3.2.5
1.4.3.4.1
1.4.3.4.2
1.4.3.4.3
1.4.3.4.6
1.4.3.4.7
1.4.3.4.7.1
1.4.3.4.8
1.4.3.4.9
WORK&EMPLY-ONLY
1.4.4.1
1.4.4.2
1.4.4.3.1
1.4.4.3.2
1.4.4.3.3
1.4.4.3.4
1.4.4.3.5
1.4.4.4
1.4.4.4.1
1.4.4.4.2
1.4.4.5
1.4.4.6.2
1.4.4.6.3
1.4.4.6.4
1.4.4.6.5
1.4.4.8.1
1.4.4.8.2
1.4.4.8.3
1.4.4.9
1.4.4.10
1.4.4.11
1.4.4.12.1
1.4.4.12.2
1.4.4.12.3
1.4.4.12.4
1.4.4.12.5
1.4.4.12.6
1.4.4.14
1.4.4.14.1
1.4.4.14.2
1.4.4.14.3
1.4.4.14.4
1.4.4.15
REC&LEISURE-ALL
1.4.5.1
1.4.5.2
1.4.5.3
LEISURE-ONLY
1.4.5.4.3
RECREATION
REC.-ONLY
1.4.5.5.1
1.4.5.5.2
B.MGT.-ALL
1.4.6.1
1.4.6.1.1
1.4.6.1.2
1.4.6.1.3
1.4.6.1.4
1.4.6.2
1.4.6.3
1.4.6.4.2
1.4.6.5
1.4.6.6
1.4.6.7.1
1.4.6.8
1.4.6.8.1.1
1.4.6.8.1.2
1.4.6.8.1.3
1.4.6.8.1.4
1.4.6.8.1.5
1.4.6.8.2
1.4.6.9
1.4.6.9.1
1.4.6.9.1.1.1
1.4.6.9.1.1.2
1.4.6.9.1.1.3
1.4.6.9.1.1.4
1.4.6.9.1.1.5
1.4.6.9.1.2.1
1.4.6.9.1.2.2
1.4.6.9.1.3
1.4.6.9.2
1.4.6.9.2.1
1.4.6.9.2.1.1
1.4.6.9.2.2
1.4.6.9.2.3
1.4.6.9.2.4
1.4.6.9.2.5
1.4.6.9.2.5.1
1.4.6.10
1.4.6.10.1
1.4.6.10.1.1
1.4.6.10.1.2
1.4.6.10.1.4.1
1.4.6.10.1.4.2
1.4.6.11.1.1
1.4.6.11.1.2
1.4.6.11.2
1.4.6.11.3
1.4.6.11.4
1.4.6.11.5
1.4.6.11.5.1
1.4.6.11.6
1.4.6.11.6.1
1.4.6.11.7
1.4.6.11.8
IND.PGM.COORD-ALL
1.5.1
1.5.1.1
1.5.2.1
1.5.2.2
1.5.2.5
1.5.2.6
1.5.2.8
1.5.3
PRGM'ING RECORD-ALL
1.6.1
1.6.1.1
1.6.1.2
1.6.1.3
1.6.1.4
1.6.1.5
1.6.1.6
1.6.1.7
1.6.2
1.6.3
1.6.3.1.2
1.6.3.2
1.6.4.1
1.6.4.2
1.6.4.3
1.6.4.4
1.6.4.5
1.6.5.1
1.6.5.2
1.6.5.3
1.6.6
1.6.7
ALT.LIV.ARR.-ALL
2.1.2
ALT.LIV.-ONLY
2.1.6
2.1.6.1
2.1.7
2.1.9
2.1.9.1
2.1.9.2
2.1.10.1
2.1.10.2
2.1.10.3.1
2.1.10.3.2
2.1.10.3.3
2.1.10.3.4
2.1.10.3.5
2.1.10.3.6
2.1.11
2.1.11.1
2.1.11.2
2.1.11.3.1
2.1.11.4
2.1.11.4.1
2.1.11.5.1
2.1.11.5.2
2.1.11.6.1
2.1.11.6.2
2.1.11.6.3
2.1.11.6.4
2.1.11.7
2.1.11.8
2.1.11.9
2.1.11.9.1
2.1.11.10
2.1.12
2.1.12.1
2.1.12.4
2.1.12.4.1
2.1.13
2.1.13.1
2.1.13.2
2.1.13.4
2.1.14
2.1.16
2.1.17.1.1
2.1.17.1.2
2.1.18
2.1.19
2.1.19.1
HOME,SITTER-ONLY
2.2.1.1.1
2.2.1.1.2
2.2.1.2
2.2.1.3
TEMP.LIV.-ONLY
2.3.1
SURR.FAM.-ONLY
2.4.1
2.4.1.1
2.4.1.2
2.4.1.3
2.4.2
2.4.3
2.4.5
2.4.6.1
2.4.7
CONG.LIV.-ONLY
2.5.1.1
2.5.1.1.1
2.5.1.1.3
2.5.1.1.4
2.5.1.2
2.5.1.3.1
2.5.1.3.4
2.5.1.3.7
2.5.1.3.8
2.5.1.3.9
2.5.1.3.10.1
2.5.1.3.10.2
PP.&RESP.-
CONG.ONLY
2.5.2.1
2.5.2.1.1
2.5.2.1.2
2.5.2.1.3
2.5.2.2
2.5.2.3
2.5.2.4
2.5.2.4.1
2.5.2.4.2
2.5.2.4.3
2.5.2.5
2.5.2.5.1
2.5.2.5.2
2.5.2.7
2.5.2.8
2.5.2.9
RIGHTS-ALL
3.1.1
3.1.1.1
3.1.1.2
3.1.1.3
3.1.2.1
3.1.3
3.1.4
3.1.4.1
3.1.4.2
3.1.4.3
3.1.4.4
3.1.4.5
3.1.4.6
3.1.4.7
3.1.5
3.1.5.1
3.1.6.1
3.1.6.2
3.1.7
3.1.7.1
3.1.8
3.1.8.2
3.1.8.6.1
3.1.8.7.1
3.1.8.7.2
3.1.8.7.3

3.1.8.7.4
3.1.8.8
3.1.9
3.1.9.1
3.1.9.2
3.1.9.3
3.1.9.4
3.1.10
3.1.10.1.1
3.1.10.1.2
3.1.10.1.3
3.1.10.1.4
3.1.10.2.2
3.1.11
3.1.12
3.1.12.1
3.1.12.2
3.1.12.3
3.1.12.4
3.1.13
3.1.14
3.1.14.1
3.1.14.1.1
3.1.14.1.2
3.1.15
3.1.15.1
3.1.15.2
3.1.15.3
3.1.16
3.1.17
3.1.17.1.1
3.1.17.2
3.1.18
3.1.18.1
3.1.19
3.1.20
3.1.21
SELF-REP.-ALL
3.2.1.1
PERS.ADVOC.-
ONLY
3.2.2.4.1
3.2.2.4.2
3.2.2.4.3
3.2.2.4.4
3.2.2.4.5
3.2.2.4.6
3.2.2.4.7
3.2.2.4.8
3.2.2.4.9
3.2.2.4.10
3.2.2.5
3.2.2.5.1
3.2.2.5.2
NOT PROVIDE
PERS.ADVOC.
3.2.2.7
3.2.2.7.1
3.2.2.7.2
3.2.2.8
AGENCY ADVOC.-
ALL
3.2.3.1
3.2.3.3
PROT.SERVICES
ALL
3.3.1
3.3.2
3.3.2.2
3.3.3
NOT PROVIDING
ROT.SERV.
3.3.4
3.3.5
PROV.PROT.SERV
ONLY
3.3.6
PROV.GUARD.-
ONLY
3.3.13
3.3.15
PHILOS.POL.
PRACT.-ALL
4.1.1
4.1.1.1
4.1.1.2
4.1.2
4.1.2.1
4.1.2.3
4.1.2.4
4.1.2.5
4.1.2.7
4.1.2.8
4.1.2.9.1
4.1.3
4.1.6
4.1.6.1
CASE FIND.-ALL
4.2.1
4.2.2.1
4.2.2.2
4.2.2.3
4.2.2.5
ADMIT/DISC.-ALL
4.3.1.1
4.3.2
4.3.3
4.3.3.1
4.3.5
4.3.5.1
4.3.6
4.3.6.2
4.3.7
4.3.8
4.3.9
4.3.9.1
4.3.9.2
4.3.9.3
4.3.10
4.3.11
4.3.12
4.3.12.1
4.3.12.2
4.3.13
4.3.13.1
4.3.13.2
4.3.13.4
4.3.14.1
4.3.14.2
FOLLOW-ALONG
ALL
4.4.1
PROV F/ALONG
4.4.5
4.4.8
HOMETRAINING ONLY
4.5.1.1.1
4.5.1.1.2
NOT HOMETRAINING
4.5.1.2
FAMILY ED ALL
4.5.2.1
4.5.2.2
4.5.2.3.1
4.5.2.3.2
4.5.3.3.3
4.5.2.7
PROP SERV ALL
4.6.1
4.6.1.1.1
4.6.1.1.2
4.6.1.2
4.6.1.3
4.6.1.4
4.6.2
4.6.2.1
4.6.2.2
4.6.2.2.1
4.6.3
4.6.7
4.6.7.1.1
4.6.7.1.2
4.6.7.1.3
4.6.7.1.4
4.6.7.1.5
4.6.7.1.6
4.6.7.1.7
4.6.7.2
4.6.7.2.1
4.6.7.2.2
4.6.7.2.3
4.6.7.2.3.1
4.6.7.2.3.2
4.6.7.2.5
4.6.7.3.1
4.6.7.3.2
4.6.7.3.3
4.6.7.4.3
4.6.7.4.4
4.6.7.4.5
4.6.7.5
4.6.15.1
4.6.15.2
4.6.15.3
4.6.15.4
4.6.15.5
4.6.15.8
4.6.15.12
4.6.15.13
4.6.15.14
4.6.15.14.1
4.6.15.14.2
STAFF QUAL-ALL
4.7.1.1
4.7.1.2
4.7.2
4.7.2.2
4.7.5
4.7.6
4.7.6.1
4.7.6.2
4.7.8.3.1.1
4.7.8.3.1.2
4.7.10.4
4.7.11.4
4.7.18.1
4.7.18.2
4.7.18.3
STAFF TRNG-ALL
4.8.1
4.8.1.1
4.8.1.2
4.8.1.3
4.8.1.4
4.8.1.6
4.8.1.7
4.8.1.9
4.8.2.1
4.8.2.2
4.8.2.3
4.8.2.4
4.8.3
4.8.6
VOL SERV-ALL
4.9.1
4.9.1.1
4.9.2
4.9.3
4.9.3.1
4.9.3.2
4.9.3.3
4.9.4
4.9.4.1
GOV.BODY/
ADMIN-ALL
4.10.1.1.1
4.10.1.1.2
4.10.1.2
4.10.1.3
4.10.1.4
4.10.1.4.1
4.10.1.4.2
4.10.1.5
4.10.1.6
4.10.1.6.3
4.10.1.8
4.10.1.8.1
4.10.1.8.1.1
4.10.1.8.2.2
4.10.1.9
4.10.1.9.1
4.10.1.9.2
4.10.1.9.3
4.10.1.9.4
4.10.1.9.5
4.10.1.9.6
4.10.1.10
4.10.1.11
4.10.1.12
4.10.1.12.1
4.10.1.12.2
4.10.1.12.8
4.10.1.13
4.10.1.13.1
4.10.1.13.2
4.10.1.13.3
4.10.1.14
4.10.1.15
4.10.1.16
4.10.1.16.3
4.10.1.16.3.1
4.10.1.16.3.2
FISCAL AFF.-
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DOCUMENT.-ALL
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EQUIP-ALL
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RESEARCH
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ONLY RESEARCH
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6.10.1
COORDINATION
ALL
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7.1.4
7.1.5.2
7.1.6
DATA DOC.
ONLY
7.2.1
7.2.2
7.2.2.3
7.2.2.4
COMM ED ALL
7.3.2.1
7.3.2.2
7.3.2.3
7.3.2.4
7.3.3.1
PREVENTION-ALL
7.4.1
MANPOWER DEV-ALL
7.5.2
7.5.3
7.5.4

APPENDIX #4

STATISTICAL SUMMARY OF AGENCY AND CLIENT CHARACTERISTICS

There are a total of five tables in Appendix #4. The five categories of agencies identified by the Project are considered: large public residential, large private residential, small private residential, public non-residential and private non-residential. The tables indicate the median, the mean, the standard deviation and the range (minimum and maximum) for each data element within the given agency category (e.g. currently surveyed: accredited). The outline below provides a brief summary of each of the data items displayed in Appendix #4.

Percent of Applicable Category A Standards (% "A" Appl.). For each survey conducted by ACMRDD, there is a calculation performed which helps to direct the final accreditation decision. The calculation consists of dividing the number of Category A standards with which the agency was in less than full compliance (deficiencies) by the number of "applicable Category A standards." The 1984 edition of ACMRDD Standards contains 794 Category A standards, broken down into seven major sections and 31 subsections. However, a number of these subsections are further subdivided into parts with Category A standards which pertain to all agencies, and those which pertain only to certain components offered by agencies. For example, not all agencies offer congregate living services. Thus, this data element in Appendix #4 presents information on the percent of Category A standards (out of a total possible 794) which were applicable. In general, this is a measure of the "comprehensiveness" of an agency. (Note: There are a total of 618 or 78% of the Category A standards potentially applicable to all agencies; however, many agencies which do not provide some of the components addressed by the ACMRDD Standards may have a significantly smaller percentage, and yet still be eligible for accreditation.)

Percent of Category A Deficient (% Def.). The accreditation decision is based in part on calculation of the number of Category A standards with which the agency was not in full compliance, divided by the number of applicable Category A standards. Generally, this percentage must not exceed 15%, in order for ACMRDD to grant 2-year or 1-year accreditation. [There may be an exception, where the Council Accreditation Committee either votes to award accreditation to an agency which had slightly more than 15% non-compliance or votes not to accredit, even though an agency has met the 15% guideline. In the latter case an agency, for example, may have technical proficiency in the recording of program implementation, etc., but as evidenced by the surveyors' overall review, does not meet the basic intent of the Standards.]

Number of Previous ACMRDD Surveys (# Prev. Surveys). This data item indicates the mean (average) number of previous surveys conducted by ACMRDD at the agency. The average number of previous surveys does not distinguish accredited vs. non-accredited outcomes; nor does the data item include the most recent survey--the one included in the Accreditation Project's database. However, previous surveys by the former organization preceding ACMRDD, the Accreditation Council for Facilities for the Mentally Retarded (ACF/MR) are included.

Number of Years Open (Yrs. Open). The number of years which the agency (facility) has been in operation. This reflects total years of operation, even if there may have been one or more changes in management during the course of operation.

Staff-to-Client Ratio (Staff Ratio). For the median staff-to-client ratio, the staff-to-client ratio at each agency within the category was calculated, and then the median was determined. Also indicated is the mean, or average staff ratio.

Staff. Total full-time equivalent staff at the agency during the time of the Application for Accreditation Survey (usually a few months preceding the survey). All categories below are also based on information from the Application for Accreditation form.

Age Categories (6 or less yrs; 7-17 years; 18 + years). The three age categories of individuals served by the agency (the three categories available from the ACMRDD application format).

Male; Female. The number of males and females served among total individuals served.

Total Clients. Total number of individuals served by the agency.

Individuals with Autism Served (Tot.Aut). (Note: This category and all below are sub-sets of the category immediately above, "Total Clients".)

Individuals with Cerebral Palsy Served (Tot. CP). Number of individuals with cerebral palsy served by the agency.

Individuals with Mental Retardation Served (Mild MR/Moderate MR; Severe MR/Profound MR).

Individuals with Partial Mobility (Mobile). Individuals served who are non-ambulatory, but nevertheless able to move with the assistance of a wheel-chair, walker, etc.

Individuals Who Are Non-ambulatory (Non-Mobile). Individuals served who are completely non-ambulatory, and who can only move around with the assistance of others.

Individuals with Seizure Disorder, Controlled Through Medication (Seiz.Control). Individuals with seizure disorder under control of medication.

Individuals with Seizure Disorder, Not Controlled (Seiz.Non-Con.).

Individuals with Hearing Problem (Hearing). Number of individuals served who have a hearing problem, but who are not considered deaf.

Individuals Served Who Are Deaf.

Individuals Served Who Have Vision Impairment (Vis. Imp.). Number of individuals served who have some form of vision impairment, but who are not blind.

Individuals Served Who Are Blind.

Other. Individuals served with some other form of physical or emotional disability, not determined.

PROPORTION OF INDIVIDUALS SERVED BY AGE AND FUNCTIONAL CHARACTERISTICS

All data items related to client characteristics are also represented in the five tables of Appendix #4 as mean and median percentages of the total clients served. The "mean percentages" in the tables represent the averages of the percentages for all of the agencies, and the "median percentages" are the mid-points of percentages for all facilities in the category.

Various Tables in the main body of this Report utilized a third measure of proportion of client characteristics. There, the proportions of individuals served by age, level of retardation and other disabilities were calculated on the basis of the total residents served by all facilities. This yields the same result as basing the percentages on the average (mean) facility within a given group.

APPENDIX # 4

Agency and Client Characteristics of Large Public Residential Agencies in the United States Surveyed by ACMRDD, 1980-84

Current Survey (1983-84)

	Large Public Residential Accredited					Large Public Residential Non-Accredited				
	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max
			n=47					n=13		
% Applicable	86.7%	86.9%	2.9%	80.7%	94.5%	82.8%	82.2%	2.5%	80.5%	89.7%
% Deficient	9.6%	10.0%	3.3%	2.3%	16.4%	19.2%	16.9%	4.5%	15.4%	32.5%
# Prev Surveys	1.89	2	1.24	0	4	1.15	0	1.51	0	4
Years Open	38.34	17	37.41	5	138	47.23	41	38.60	8	143
Staff Ratio	1.43	1.45	0.44	0.24	2.58	1.64	1.55	0.23	1.32	2.23
Staff	606.17	456	462.80	40	1912	669.23	690	369.32	140	1385
6 or Less years	14.47	0	47.52	0	282	2.00	1	2.48	0	7
7-17 Years	73.96	44	82.42	0	423	76.54	25	114.59	2	452
18 + Years	405.21	294	376.77	17	1707	341.15	370	191.80	84	672
Male	287.72	218	238.06	19	901	244.08	248	146.64	63	597
Female	205.91	120	210.19	0	973	175.62	172	113.29	27	456
Total Clients	493.64	343	443.98	27	1854	419.69	403	258.68	96	1053
Total Autism	24.57	6	39.62	0	204	9.38	2	21.78	0	82
Total CP	114.05	39	151.00	0	569	98.15	89	95.01	0	309
Mild MR	34.26	18	46.28	2	275	15.00	9	14.07	2	42
Moderate MR	59.23	43	71.69	4	447	41.85	24	41.02	4	156
Severe MR	104.85	84	86.59	2	421	81.67	62	50.09	24	169
Profound MR	272.60	171	300.13	0	1099	278.92	329	177.25	58	705
Mobile	117.87	37	248.89	0	1305	60.15	50	37.91	13	146
Non-Mobile	88.40	26	134.29	0	545	81.31	57	60.72	1	177
Seiz Control	144.32	91	147.70	3	591	120.38	101	106.75	0	440
Seiz Non-Control	86.70	14	236.44	0	1355	51.54	27	58.08	0	199
Hard Hearing	55.74	19	97.06	0	485	28.46	19	27.30	4	108
Deaf	17.49	8	31.83	0	196	13.00	6	12.29	0	35
Vis Impaired	77.74	30	106.79	0	371	58.23	48	58.13	10	215
Blind	38.89	11	63.20	0	343	36.38	37	20.34	6	65
Other	60.91	0	193.45	0	958	8.23	0	20.36	0	71
Client Survey Groups as Proportion of Total Clients										
%6 or Less years	1.7%	0.0%				0.4%	0.2%			
%7-17 Years	17.6%	14.8%				16.0%	13.9%			
%18 + Years	80.6%	83.4%				83.7%	85.3%			
%Male	61.3%	60.2%				59.5%	57.3%			
%Female	38.7%	39.8%				40.5%	42.7%			
%Total Autism	6.1%	2.5%				3.3%	0.3%			
%Total CP	18.4%	13.5%				22.3%	13.9%			
%Mild MR	8.5%	5.4%				3.6%	2.7%			
%Moderate MR	13.9%	11.7%				8.9%	8.1%			
%Severe MR	23.5%	23.0%				21.3%	20.3%			
%Profound MR	51.1%	54.6%				65.7%	67.4%			
%Mobile	19.0%	10.0%				20.3%	14.1%			
%Non-Mobile	13.6%	10.3%				22.9%	19.3%			
%Seiz Control	31.4%	32.7%				30.1%	30.6%			
%Seiz Non-Control	11.5%	4.8%				11.8%	7.4%			
%Hard Hearing	7.8%	5.1%				6.2%	6.7%			
%Deaf	3.0%	2.1%				2.7%	2.9%			
%Vis Impaired	13.1%	10.6%				12.8%	12.7%			
%Blind	6.3%	5.2%				10.0%	8.6%			
%Other	8.1%	0.0%				3.7%	0.0%			

Previous Survey (1980-82)

	Large Public Residential Accredited					Large Public Residential Non-Accredited				
	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max
			n=38					n=1		
% Applicable	86.3%	87.0%	5.4%	73.4%	99.2%	85.0%	85.0%	.0%	85.0%	85.0%
% Deficient	9.0%	8.5%	2.7%	3.9%	14.7%	14.5%	14.5%	0.0%	14.5%	14.5%
# Prev Surveys	1.65	1	1.02	0	3	1.00	1	0.00	1	1
Years Open	34.89	17	35.27	6	138	133.00	133	0.00	133	133
Staff Ratio	1.42	1.42	0.46	0.00	2.50	0.79	0.79	.00	0.79	0.79
Staff	633.24	520	497.48	21	1900	515.00	515	0.00	515	515
6 or Less years	3.92	1	6.53	0	27	2.00	2	0.00	2	2
7-17 Years	72.82	48	72.55	0	286	108.00	108	0.00	108	108
18 + Years	388.26	304.5	386.01	0	1820	540.00	540	0.00	540	540
Male	269.82	227.5	233.24	8	1041	416.00	416	0.00	416	416
Female	195.18	145	199.08	0	959	234.00	234	0.00	234	234
Total Clients	465.00	373.5	430.36	13	2000	650.00	650	0.00	650	650
Total Autism	19.47	2	41.91	0	185	10.00	10	0.00	10	10
Total CP	107.42	37.5	147.21	0	610	41.00	41	0.00	41	41
Mild MR	27.00	21	23.61	0	87	84.00	84	0.00	84	84
Moderate MR	51.79	39	50.59	2	236	65.00	65	0.00	65	65
Severe MR	101.95	76.5	104.72	3	381	80.00	80	0.00	80	80
Profound MR	280.55	190	283.83	0	1118	421.00	421	0.00	421	421
Mobile	84.21	28.5	160.89	0	912	66.00	66	0.00	66	66
Non-Mobile	113.08	48	253.06	0	1522	84.00	84	0.00	84	84
Seiz Control	131.71	79	133.26	2	668	207.00	207	0.00	207	207
Seiz Non-Control	54.21	20.5	91.75	0	414	0.00	0	0.00	0	0
Hard Hearing	42.61	23.5	76.25	0	453	32.00	32	0.00	32	32
Deaf	13.32	5.5	22.00	0	126	5.00	5	0.00	5	5
Vis Impaired	56.18	29	78.50	1	362	94.00	94	0.00	94	94
Blind	39.21	20	61.13	0	311	5.00	5	0.00	5	5
Other	17.42	1	48.08	0	201	187.00	187	0.00	187	187
Client Survey Groups as Proportion of Total Clients										
%6 or Less years	1.7%	0.2%				0.3%	0.3%			
%7-17 Years	21.6%	17.2%				16.6%	16.6%			
%18 + Years	76.7%	82.3%				83.1%	83.1%			
%Male	61.4%	59.1%				64.0%	64.0%			
%Female	38.6%	40.8%				36.0%	36.0%			
%Total Autism	4.9%	0.9%				1.5%	1.5%			
%Total CP	20.0%	11.2%				6.3%	6.3%			
%Mild MR	8.2%	5.4%				12.9%	12.9%			
%Moderate MR	12.7%	10.9%				10.0%	10.0%			
%Severe MR	24.0%	22.1%				12.3%	12.3%			
%Profound MR	54.4%	58.0%				64.8%	64.8%			
%Mobile	17.5%	10.6%				10.2%	10.2%			
%Non-Mobile	17.0%	13.5%				12.9%	12.9%			
%Seiz Control	29.6%	29.2%				44.2%	44.2%			
%Seiz Non-Control	10.0%	8.3%				0.0%	0.0%			
%Hard Hearing	7.8%	7.0%				4.9%	4.9%			
%Deaf	2.4%	1.9%				0.8%	0.8%			
%Vis Impaired	10.9%	9.3%				14.5%	14.5%			
%Blind	7.1%	6.4%				0.8%	0.8%			
%Other	3.9%	0.2%				28.8%	28.8%			

Agency and Client Characteristics of Large Private Residential Agencies in the United States Surveyed by ACMRDD, 1980-84

	Current Survey (1983-84)										Previous Survey (1980-82)									
	Large Private Residential Accredited n=9					Large Private Residential Non-Accredited n=5					Large Private Residential Accredited n=5					Large Private Residential Non-Accredited n=2				
	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max
% Applicable	84.5%	80.7%	6.2%	77.2%	93.6%	75.5%	78.6%	5.6%	65.9%	80.4%	82.2%	80.9%	2.1%	80.1%	84.9%	43.3%	43.3%	43.3%	0.0%	86.5%
% Deficient	9.4%	9.0%	2.8%	6.7%	15.2%	21.7%	16.7%	10.5%	15.6%	42.6%	9.6%	10.6%	2.0%	7.1%	12.3%	18.2%	18.2%	.0%	18.2%	18.2%
# Prev Surveys	1.11	0	1.59	0	5	0.20	0	0.40	0	1	1.60	1	1.62	0	4	1.00	1	0.00	1	1
Years Open	29.00	23	24.98	6	72	14.00	13	7.75	5	26	14.60	11	7.81	7	24	76.50	76.5	4.50	72	81
Staff Ratio	1.42	1.49	0.38	0.66	2.03	0.71	0.59	0.35	0.36	1.25	1.23	1.29	0.45	0.39	1.70	1.01	1.01	0.05	0.96	1.06
Staff	227.67	128	225.12	56	800	47.00	27	32.47	13	101	125.20	142	67.07	16	217	521.50	521.5	14.50	507	536
6 or Less years	3.67	0	8.46	0	27	0.40	0	0.80	0	2	18.40	0	22.57	0	48	2.00	2	2.00	0	4
7-17 Years	54.00	24	79.17	0	264	6.40	0	8.45	0	21	33.40	24	32.38	0	80	126.00	126	94.00	32	220
18 + Years	100.22	52	94.06	0	278	70.40	68	60.32	7	179	42.80	32	51.82	0	141	390.50	390.5	106.50	284	497
Male	92.56	55	93.92	32	343	41.20	41	28.51	13	93	53.00	56	21.95	23	86	308.50	308.5	30.50	278	339
Female	65.33	39	58.19	20	205	36.00	34	28.01	5	86	41.60	54	18.56	18	60	210.00	210	41.00	169	251
Total Clients	157.89	87	150.84	56	548	77.20	76	56.30	22	179	94.60	110	39.27	41	142	518.50	518.5	10.50	508	529
Total Autism	5.56	2	9.06	0	30	0.40	0	0.80	0	2	1.40	0	1.96	0	5	42.00	42	42.00	0	84
Total CP	42.22	12	42.58	3	113	13.40	5	18.45	0	50	40.00	5	47.32	0	113	54.50	54.5	9.50	45	64
Mild MR	30.00	18	41.32	0	140	11.60	4	14.76	0	39	6.20	4	8.06	0	22	113.00	113	41.00	72	154
Moderate MR	34.67	20	39.67	0	135	15.20	1	23.51	0	61	7.80	11	6.46	0	14	164.00	164	41.00	123	205
Severe MR	37.22	21	45.88	3	159	21.60	8	23.95	0	64	13.80	13	7.91	4	28	114.50	114.5	42.50	72	157
Profound MR	55.89	45	51.54	1	134	25.20	15	26.70	0	77	66.00	96	48.49	6	120	127.00	127	32.00	95	159
Mobile	28.67	13	32.39	0	99	2.20	0	2.86	0	7	15.60	8	15.73	2	44	42.50	42.5	22.50	20	65
Non-Mobile	25.56	12	34.46	0	111	14.80	0	29.60	0	74	45.20	20	47.33	0	103	41.50	41.5	2.50	39	44
Seiz Control	34.89	23	26.30	10	84	13.40	12	8.80	0	24	34.00	15	27.57	9	72	110.00	110	13.00	97	123
Seiz Non-Control	15.33	5	18.50	0	55	0.80	0	1.60	0	4	16.80	0	20.61	0	44	9.00	9	9.00	0	18
Hard Hearing	15.44	10	14.52	1	44	1.80	0	3.60	0	9	18.80	16	16.68	1	44	15.00	15	15.00	0	30
Deaf	3.44	2	5.36	0	18	2.80	0	3.92	0	10	3.60	2	4.13	0	11	28.00	28	22.00	6	50
Vis Impaired	28.00	3	37.47	0	107	5.00	0	8.58	0	22	24.00	6	27.28	0	66	83.00	83	83.00	0	166
Blind	10.44	5	12.45	0	42	3.60	1	4.59	0	12	18.80	12	18.69	0	47	14.00	14	8.00	6	22
Other	8.56	1	20.73	0	67	10.00	2	12.07	0	30	3.80	0	5.46	0	14	0.00	0	0.00	0	0
Client Survey Groups as Proportion of Total Clients																				
%6 or Less years	2.5%	0.0%				0.5%	0.0%				15.8%	0.0%				0.4%	0.4%			
%7-17 Years	32.8%	41.3%				17.7%	0.0%				32.9%	42.8%				24.7%	24.7%			
%18 + Years	64.6%	58.6%				81.8%	100.0%				51.3%	57.1%				74.9%	74.9%			
%Male	58.1%	56.8%				56.3%	51.9%				56.7%	56.0%				59.6%	59.6%			
%Female	41.9%	43.1%				43.7%	48.0%				43.3%	43.9%				40.4%	40.4%			
%Total Autism	2.8%	1.3%				1.4%	0.0%				2.1%	0.0%				7.9%	7.9%			
%Total CP	32.4%	10.2%				18.3%	9.2%				32.3%	8.9%				10.6%	10.6%			
%Mild MR	19.3%	20.6%				11.9%	18.1%				10.6%	2.8%				22.0%	22.0%			
%Moderate MR	22.4%	23.5%				11.2%	3.5%				12.7%	9.8%				31.5%	31.5%			
%Severe MR	21.4%	22.7%				22.3%	28.5%				17.7%	19.7%				21.9%	21.9%			
%Profound MR	33.3%	24.4%				38.2%	19.7%				57.4%	67.6%				24.6%	24.6%			
%Mobile	17.3%	10.4%				2.8%	0.0%				13.2%	7.3%				8.1%	8.1%			
%Non-Mobile	16.4%	8.9%				18.3%	0.0%				30.3%	14.0%				3.0%	8.0%			
%Seiz Control	25.7%	21.4%				17.7%	15.7%				32.2%	26.7%				21.2%	21.2%			
%Seiz Non-Control	11.1%	6.8%				1.0%	0.0%				14.5%	0.0%				1.7%	1.7%			
%Hard Hearing	9.3%	7.3%				1.0%	0.0%				15.6%	12.9%				2.8%	2.8%			
%Deaf	1.8%	1.3%				2.9%	0.0%				3.0%	1.6%				5.5%	5.5%			
%Vis Impaired	11.9%	3.8%				4.6%	0.0%				20.1%	4.8%				15.7%	15.7%			
%Blind	7.4%	3.4%				3.8%	1.3%				15.7%	8.4%				2.7%	2.7%			
%Other	4.3%	1.6%				21.1%	7.1%				7.4%	0.0%				0.0%	0.0%			

Agency and Client Characteristics of Small Private Residential Agencies in the United States Surveyed by ACMRDD, 1980-84

	Current Survey (1983-84)										Previous Survey (1980-82)									
	Small Private Residential Accredited					Small Private Residential Non-Accredited					Small Private Residential Accredited					Small Private Residential Non-Accredited				
	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max
			n=17					n=11					n=10					n=3		
% Applicable	79.3%	79.8%	5.6%	63.5%	87.8%	73.4%	72.8%	5.0%	64.5%	79.6%	47.0%	69.5%	38.7%	0.0%	85.4%	49.0%	72.3%	34.7%	0.0%	74.7%
% Deficient	7.7%	8.7%	2.4%	3.7%	11.4%	20.7%	18.7%	4.5%	15.3%	28.9%	3.6%	1.9%	4.0%	0.0%	9.7%	20.4%	27.8%	14.6%	0.0%	33.4%
# Prev Surveys	0.82	1	0.92	0	3	0.27	0	0.45	0	1	0.30	0	0.67	0	2	0.00	0	0.00	0	0
Years Open	13.41	11	5.95	5	28	17.09	10	19.78	5	77	15.10	15.5	6.62	7	29	17.67	13	11.17	7	33
Staff Ratio	0.75	0.52	0.56	0.15	2.30	0.70	0.69	0.21	0.38	1.19	0.86	0.71	0.56	0.16	1.81	0.99	1.31	0.66	0.07	1.60
Staff	34.71	24	40.53	5	179	27.18	25	10.28	8	42	26.10	19.5	20.28	4	58	24.00	17	11.34	15	40
6 or Less years	0.71	0	2.35	0	10	0.00	0	0.00	0	0	1.70	0	3.10	0	10	4.33	0	6.13	0	13
7-17 Years	6.29	0	12.93	0	51	1.09	0	1.73	0	6	7.00	0	13.86	0	41	16.00	0	22.63	0	48
18 + Years	44.76	38	41.53	4	173	40.27	32	16.05	11	63	28.00	21	24.27	2	65	62.67	25	61.95	13	150
Male	28.35	21	24.23	0	100	22.27	21	9.61	6	40	19.00	19.5	12.07	0	36	45.00	9	52.33	7	119
Female	23.41	22	19.59	3	88	19.09	18	9.03	5	40	17.70	17	12.11	3	40	38.00	16	39.40	6	92
Total Clients	51.76	46	42.60	5	188	41.36	32	16.43	11	63	36.70	34.5	23.41	4	75	83.00	25	90.64	13	211
Total Autism	2.76	0	4.67	0	16	1.27	0	2.30	0	6	1.50	1	1.69	0	5	4.00	1	4.97	0	11
Total CP	3.88	3	3.85	0	13	2.55	1	2.81	0	8	3.50	1.5	4.20	1	15	31.33	5	39.38	2	87
Mild MR	17.18	13	16.63	0	40	14.27	11	12.88	4	46	10.20	4.5	11.81	0	38	38.00	13	41.88	4	97
Moderate MR	15.94	13	14.33	4	63	12.55	12	6.77	2	25	12.50	12.5	7.76	3	23	27.00	5	31.82	4	72
Severe MR	13.53	10	17.00	0	66	6.00	2	5.56	0	15	7.80	5	7.65	0	22	14.33	6	15.46	1	36
Profound MR	2.82	2	3.63	0	15	3.18	1	4.17	0	12	3.00	1	3.71	0	11	3.67	3	1.70	2	6
Mobile	1.65	1	1.85	0	6	1.82	2	1.75	0	5	2.00	1	2.41	0	7	5.33	1	6.85	0	15
Non-Mobile	1.29	0	2.54	0	9	0.27	0	0.62	0	2	1.30	0	2.41	0	8	2.00	1	1.41	1	4
Seiz Control	6.53	6	4.92	0	15	5.00	5	2.86	1	10	6.20	5	5.00	0	14	19.67	6	21.48	3	50
Seiz Non-Control	2.29	0	3.85	0	13	1.82	0	2.89	0	10	1.60	0.5	2.11	0	6	4.00	0	5.66	0	12
Hard Hearing	2.18	2	2.38	0	9	2.82	2	2.79	0	11	0.90	0.5	1.14	0	3	9.00	1	12.03	0	26
Deaf	0.94	0	1.35	0	5	0.64	0	0.98	0	3	0.90	1	0.83	0	2	1.33	0	1.89	0	4
Vis Impaired	2.00	1	2.91	0	12	4.45	2	6.73	0	21	2.70	1	3.66	0	12	5.33	2	6.18	0	14
Blind	1.12	0	1.45	0	5	0.73	0	0.96	0	3	1.40	1.5	1.11	0	3	1.67	0	2.36	0	5
Other	1.71	0	3.37	0	11	6.00	0	12.47	0	44	4.50	1.5	5.30	0	14	0.00	0	0.00	0	0
Client Survey Groups as Proportion of Total Clients																				
%6 or Less years	1.2%	0.0%				0.0%	0.0%				3.1%	0.0%				2.1%	0.0%			
%7-17 Years	12.7%	0.0%				2.5%	0.0%				16.8%	0.0%				7.6%	0.0%			
%18 + Years	86.2%	96.7%				97.5%	100.0%				80.1%	99.2%				90.4%	100.0%			
%Male	51.5%	52.3%				54.1%	54.5%				49.4%	56.2%				48.7%	53.8%			
%Female	48.5%	47.6%				45.9%	45.4%				50.6%	43.7%				51.3%	46.1%			
%Total Autism	8.8%	0.0%				3.3%	0.0%				6.5%	3.8%				3.1%	3.9%			
%Total CP	7.5%	7.1%				6.6%	3.5%				11.6%	9.6%				25.5%	19.9%			
%Mild MR	29.3%	29.5%				37.1%	34.3%				22.0%	24.2%				42.9%	45.9%			
%Moderate MR	35.5%	33.3%				32.2%	32.7%				41.7%	36.1%				29.5%	34.1%			
%Severe MR	20.8%	19.9%				16.5%	9.0%				20.9%	22.0%				16.3%	17.0%			
%Profound MR	7.5%	3.0%				8.5%	6.2%				7.0%	2.5%				11.3%	7.9%			
%Mobile	8.5%	1.6%				4.0%	3.2%				15.4%	2.3%				4.9%	7.1%			
%Non-Mobile	2.7%	0.0%				0.6%	0.0%				3.4%	0.0%				4.5%	3.9%			
%Seiz Control	14.7%	14.1%				12.7%	14.7%				18.8%	15.4%				23.6%	23.6%			
%Seiz Non-Control	3.5%	0.0%				3.6%	0.0%				5.0%	1.3%				1.9%	0.0%			
%Hard Hearing	3.9%	3.0%				7.5%	6.5%				1.9%	0.8%				6.7%	7.6%			
%Deaf	1.3%	0.0%				1.3%	0.0%				2.0%	1.7%				0.6%	0.0%			
%Vis Impaired	5.6%	2.1%				11.1%	3.2%				10.6%	3.8%				7.3%	6.6%			
%Blind	2.2%	0.0%				2.4%	0.0%				5.1%	4.3%				0.8%	0.0%			
%Other	4.9%	0.0%				11.4%	0.0%				12.4%	7.3%				0.0%	0.0%			

Agency and Client Characteristics of Non-Residential Public Agencies in the United States Surveyed by ACMRDD, 1980-84

	Current Survey (1983-84)										Previous Survey (1980-82)									
	Non-Residential Public Accredited					Non-Residential Public Non-Accredited					Non-Residential Public Accredited					Non-Residential Public Non-Accredited				
	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max
			n=8					n=2					n=3					n=0		
% Applicable	73.7%	80.0%	12.4%	55.0%	86.9%	65.8%	65.8%	0.8%	65.0%	66.6%	81.8%	86.0%	15.4%	61.0%	97.6%	0.0%	0.0%	0.0%	0.0%	0.0%
% Deficient	11.1%	10.8%	3.4%	7.1%	19.1%	20.9%	20.9%	1.9%	19.0%	22.9%	6.8%	4.6%	5.1%	1.9%	13.8%	0.0%	0.0%	0.0%	0.0%	0.0%
# Prev Surveys	0.88	0.5	1.05	0	3	0.00	0	0.00	0	0	1.00	1	0.82	0	2	0.00	0	0.00	0	0
Years Open	13.75	14.5	3.80	6	18	20.00	20	3.00	17	23	13.33	12	2.62	11	17	0.00	0	0.00	0	0
Staff Ratio	0.32	0.22	0.24	0.08	0.67	0.49	0.49	0.12	0.38	0.61	1.07	0.39	1.15	0.14	2.69	0.00	0.00	0.00	0.00	0.00
Staff	124.88	62.5	133.08	7	363	256.50	256.5	206.50	50	463	103.00	78	75.18	26	205	0.00	0	0.00	0	0
6 or Less years	42.63	19.5	46.17	0	126	47.50	47.5	47.50	0	95	36.33	27	25.37	11	71	0.00	0	0.00	0	0
7-17 Years	60.00	52.5	54.27	0	142	166.00	166	166.00	0	332	59.67	70	33.87	14	95	0.00	0	0.00	0	0
18 + Years	296.75	179	290.00	1	897	444.50	444.5	362.50	82	807	148.67	18	194.77	4	424	0.00	0	0.00	0	0
Male	227.63	197	188.18	15	630	353.00	353	309.00	44	662	143.00	108	118.95	18	303	0.00	0	0.00	0	0
Female	171.75	132.5	142.13	10	424	305.00	305	267.00	38	572	101.67	76	86.43	11	218	0.00	0	0.00	0	0
Total Clients	399.38	329.5	327.52	25	1054	658.00	658	576.00	82	1234	244.67	184	205.39	29	521	0.00	0	0.00	0	0
Total Autism	15.75	2	37.14	0	114	15.00	15	15.00	0	30	3.67	2	3.86	0	9	0.00	0	0.00	0	0
Total CP	53.38	29	62.35	3	202	59.50	59.5	56.50	3	116	32.67	38	19.96	6	54	0.00	0	0.00	0	0
Mild MR	83.13	71.5	57.35	8	181	71.00	71	23.00	48	94	70.67	38	63.92	14	160	0.00	0	0.00	0	0
Moderate MR	88.00	64.5	76.62	2	228	175.50	175.5	168.50	7	344	70.33	37	74.07	1	173	0.00	0	0.00	0	0
Severe MR	72.38	39.5	85.73	0	268	218.50	218.5	218.50	0	437	36.33	14	41.12	1	94	0.00	0	0.00	0	0
Profound MR	64.13	17.5	117.85	0	371	135.50	135.5	135.50	0	271	9.67	5	10.34	0	24	0.00	0	0.00	0	0
Mobile	25.38	7.5	43.77	3	140	25.50	25.5	23.50	2	49	10.00	13	6.48	1	16	0.00	0	0.00	0	0
Non-Mobile	33.00	20.5	32.28	0	94	28.00	28	28.00	0	56	16.67	9	12.28	7	34	0.00	0	0.00	0	0
Seiz Control	47.38	20.5	62.77	7	202	75.50	75.5	75.50	0	151	18.33	11	16.36	3	41	0.00	0	0.00	0	0
Seiz Non-Control	18.13	3.5	24.78	0	68	66.50	66.5	53.50	13	120	3.00	2	2.94	0	7	0.00	0	0.00	0	0
Hard Hearing	17.00	6.5	20.51	1	67	12.00	12	12.00	0	24	10.67	3	11.56	2	27	0.00	0	0.00	0	0
Deaf	5.75	2.5	8.45	0	27	5.50	5.5	4.50	1	10	4.67	4	3.30	1	9	0.00	0	0.00	0	0
Vis Impaired	29.88	9.5	38.31	0	104	38.50	38.5	38.50	0	77	30.67	17	31.33	1	74	0.00	0	0.00	0	0
Blind	13.50	4	21.65	0	68	15.50	15.5	13.50	2	29	5.67	3	6.02	0	14	0.00	0	0.00	0	0
Other	80.75	30	100.71	0	272	5.00	5	5.00	0	10	43.67	55	32.05	0	76	0.00	0	0.00	0	0
Client Survey Groups as Proportion of Total Clients																				
%6 or Less years	26.3%	5.6%				3.8%	3.8%				27.2%	37.9%								
%7-17 Years	11.3%	11.5%				13.5%	13.5%				37.8%	48.2%								
%18 + Years	62.4%	76.1%				82.7%	82.7%				35.0%	13.7%								
%Male	58.5%	59.3%				53.7%	53.7%				59.6%	58.6%								
%Female	41.5%	40.6%				46.3%	46.3%				40.4%	41.3%								
%Total Autism	3.2%	0.5%				1.2%	1.2%				1.8%	0.3%								
%Total CP	13.7%	11.2%				6.5%	6.5%				17.2%	20.6%								
%Mild MR	25.7%	24.2%				33.1%	33.1%				33.2%	30.7%								
%Moderate MR	24.1%	22.0%				18.2%	18.2%				18.9%	20.1%								
%Severe MR	12.8%	14.4%				17.7%	17.7%				9.7%	7.6%								
%Profound MR	8.4%	5.1%				11.0%	11.0%				2.4%	2.7%								
%Mobile	7.1%	2.9%				3.2%	3.2%				4.9%	3.4%								
%Non-Mobile	9.2%	8.6%				2.3%	2.3%				11.9%	6.5%								
%Seiz Control	12.4%	9.9%				6.1%	6.1%				8.1%	7.8%								
%Seiz Non-Control	3.4%	2.5%				12.8%	12.8%				0.8%	1.0%								
%Hard Hearing	5.7%	4.5%				1.0%	1.0%				4.6%	5.1%								
%Deaf	1.4%	1.0%				1.0%	1.0%				2.4%	2.1%								
%Vis Impaired	6.6%	6.1%				3.1%	3.1%				9.0%	9.2%								
%Blind	1.9%	1.5%				2.4%	2.4%				1.4%	1.6%								
%Other	23.0%	16.5%				6.1%	6.1%				17.3%	10.5%								

Agency and Client Characteristics of Non-Residential Private Agencies in the United States Serveved by ACMRDD, 1980-84

	Current Survey (1983-84)										Previous Survey (1980-82)									
	Non-Residential Private Accredited					Non-Residential Private Non-Accredited					Non-Residential Private Accredited					Non-Residential Private Non-Accredited				
	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max	Mean	Median	Std Dev	Min	Max
			n=50					n=24					n=39					n=9		
% Applicable	75.4%	80.0%	10.0%	29.7%	87.0%	71.9%	71.9%	8.3%	52.9%	81.4%	47.5%	67.9%	38.2%	0.0%	94.6%	60.7%	66.1%	22.6%	0.0%	81.9%
% Deficient	8.5%	8.1%	4.7%	0.6%	29.7%	24.3%	20.9%	7.7%	13.4%	44.0%	6.9%	0.0%	4.0%	0.0%	15.6%	20.9%	19.5%	10.2%	0.0%	35.4%
# Prev Surveys	1.04	1	0.92	0	4	0.29	0	0.68	0	3	0.69	0	0.91	0	3	0.00	0	0.00	0	0
Years Open	19.26	14.5	9.47	7	49	18.79	16.5	8.12	9	32	18.77	16	8.84	8	49	20.89	22	8.23	7	34
Staff Ratio	0.39	0.36	0.21	0.03	1.26	0.34	0.27	0.17	0.18	0.90	0.44	0.36	0.35	0.07	2.15	0.34	0.33	0.13	0.19	0.57
Staff	50.76	31	53.57	7	275	30.08	21.5	31.42	4	159	44.72	23	59.10	6	321	36.44	17	38.36	8	136
6 or Less years	15.06	0	25.28	0	117	7.63	0	21.21	0	77	14.10	1	22.17	0	80	4.56	0	12.89	0	41
7-17 Years	25.02	0	86.97	0	555	2.50	0	9.06	0	45	23.10	2	61.33	0	361	0.22	0	0.63	0	2
18 + Years	155.24	76	255.65	0	1487	78.17	54.5	48.53	20	193	83.54	60	99.78	0	448	98.86	49	68.98	25	198
Male	104.80	48.5	177.14	9	1108	48.17	30	35.41	14	136	67.03	38	80.92	7	412	57.00	28	44.66	9	128
Female	90.52	40.5	160.94	8	1051	40.13	35	27.77	1	122	53.46	31	65.93	0	309	46.33	27	33.50	15	111
Total Clients	195.32	84	337.31	19	2159	88.29	61.5	60.98	20	241	120.49	67	145.45	10	721	103.33	49	76.56	25	239
Total Autism	2.48	0	4.78	0	22	6.58	0	20.78	0	103	1.44	0	2.32	0	10	4.22	3	4.37	0	13
Total CP	18.98	9.5	24.86	0	130	29.54	4	51.03	0	217	20.87	12	32.09	0	171	7.78	5	7.42	0	24
Mild MR	53.26	27	89.49	0	353	20.58	17.5	16.10	0	81	29.44	17	33.06	0	164	29.67	13	36.85	0	103
Moderate MR	68.70	26.5	151.64	0	1006	25.25	16	22.64	2	86	43.03	23	77.38	0	465	31.33	15	23.80	4	65
Severe MR	39.92	17	82.47	0	499	17.17	11.5	16.67	0	65	22.10	12	27.13	1	123	27.00	29	19.57	1	58
Profound MR	13.84	6.5	21.67	0	99	12.17	4.5	19.18	0	78	10.26	5	14.15	0	74	10.22	5	11.18	1	31
Mobile	23.66	7	38.71	0	191	15.25	2	27.71	0	101	12.59	6	21.43	0	95	10.44	4	14.86	0	42
Non-Mobile	5.30	1	10.41	0	41	9.67	0	29.43	0	139	7.21	2	14.33	0	78	1.78	1	2.57	0	7
Seiz Control	28.58	11.5	55.16	0	352	14.83	11	14.60	2	68	19.51	10	32.54	0	154	11.89	7	10.43	0	35
Seiz Non-Control	5.50	1.5	8.30	0	37	4.17	0.5	8.42	0	30	4.87	1	8.02	0	42	2.89	0	7.82	0	25
Hard Hearing	7.08	2.5	13.81	0	88	3.83	2	4.88	0	23	6.85	2	15.72	0	97	3.67	2	4.62	0	12
Deaf	1.84	1	2.47	0	12	5.13	0.5	20.85	0	105	1.67	1	2.70	0	15	1.33	1	1.15	0	3
Vis Impaired	14.60	3.5	32.08	0	170	8.25	4.5	13.58	0	67	11.03	3	31.68	0	197	5.00	2	8.73	0	29
Blind	3.08	2	5.29	0	35	1.67	1	2.70	0	11	2.59	2	3.50	0	20	1.78	2	1.55	0	4
Other	30.88	4.5	100.86	0	645	18.29	2.5	35.88	0	173	11.59	2	17.04	0	75	6.44	0	8.10	0	20
Client Survey Groups as Proportion of Total Clients																				
%6 or Less years	14.3%	0.0%				4.6%	0.0%				16.4%	1.4%				1.9%	0.0%			
%7-17 Years	5.5%	0.0%				1.7%	0.0%				12.7%	2.2%				0.1%	0.0%			
%18 + Years	80.2%	97.2%				94.1%	100.0%				71.1%	82.2%				98.0%	100.0%			
%Male	52.4%	52.4%				54.8%	53.2%				55.3%	53.8%				52.4%	53.1%			
%Female	47.6%	47.5%				45.2%	46.7%				44.7%	46.1%				47.6%	46.8%			
%Total Autism	1.5%	0.0%				7.2%	0.0%				1.5%	0.0%				4.1%	4.6%			
%Total CP	13.6%	10.4%				14.2%	5.5%				20.2%	11.4%				8.3%	6.1%			
%Mild MR	27.4%	29.4%				29.0%	29.4%				25.6%	25.0%				22.4%	11.6%			
%Moderate MR	28.9%	30.5%				29.7%	27.5%				32.1%	29.6%				28.8%	31.2%			
%Severe MR	20.7%	18.7%				19.1%	15.6%				19.0%	19.4%				28.2%	23.9%			
%Profound MR	9.6%	6.9%				12.2%	8.4%				9.5%	7.4%				12.9%	7.9%			
%Mobile	21.3%	6.6%				18.2%	4.5%				13.9%	5.7%				21.4%	3.1%			
%Non-Mobile	5.2%	0.5%				5.6%	0.0%				7.9%	1.6%				2.9%	0.4%			
%Seiz Control	14.8%	14.3%				17.0%	16.5%				14.2%	12.3%				12.8%	12.6%			
%Seiz Non-Control	3.6%	1.2%				3.5%	0.3%				3.8%	2.0%				1.9%	0.0%			
%Hard Hearing	3.8%	3.4%				4.2%	3.4%				4.3%	3.5%				2.7%	2.3%			
%Deaf	1.3%	1.0%				3.8%	0.2%				1.3%	0.3%				1.6%	0.5%			
%Vis Impaired	6.7%	4.1%				8.6%	6.9%				6.3%	3.8%				3.8%	2.9%			
%Blind	2.3%	1.1%				1.5%	0.7%				3.1%	1.3%				2.0%	1.6%			
%Other	14.5%	5.6%				19.2%	2.2%				12.3%	4.9%				5.8%	0.0%			

APPENDIX #5

ENUMERATION OF CRITICAL STANDARDS

a.) Large Residential Agencies......Page A-35
b.) Small Residential Agencies......Page A-38
c.) Non-Residential Agencies........Page A-41

In this Appendix, Critical Standards are enumerated for the three major categories of agencies currently surveyed by ACMRDD. The first category consisted of 60 Large Public Residential agencies and 14 Large Private Residential agencies. The second category was the 28 Small Private Residential agencies. There were no Small Public Residential agencies surveyed in 1983-84. The third major category consisted of 10 Public and 74 Private Non-Residential agencies.

For each of the three major categories, all Category A standards with which 40% of either accredited or non-accredited agencies were found to be in less than full compliance were listed. The first column indicates the ACMRDD standard number, followed by a column indicating the percentage of accredited agencies which were non-compliant with each standard. The third column presents the percentage of non-compliance for non-accredited agencies, and the fourth column indicates, for all agencies in the major category (e.g. large residential) the percentage of currently surveyed agencies which were found to be in less than full compliance.

The final column provides a brief summary of the content of each standard on the critical standard enumeration. The reader is cautioned not to interpret the standard's content based on this summary alone, but rather to refer to the ACMRDD Standards for the full meaning of the standard.

APPENDIX # 5

CRITICAL AC MRDD "A" STANDARDS @ 40% CRITERION
FOR 74 LARGE RESIDENTIAL AGENCIES

STANDARD #	A % (56)	NA % (18)	TOT % (74)	
INDIVIDUAL PROGRAM PLANNING & IMPLEMENTATION (N=62)				
1.1.1	48%	78%	55%	I.D. team identified for each individual
1.1.2	23%	78%	36%	I.D. team properly constituted
1.1.2.1	29%	56%	35%	I.D. team works with professionals
1.2.7.2	18%	44%	24%	I.D. team identifies developmental strengths
1.2.8.5	55%	61%	57%	Assessment includes visual screening
1.2.8.6	29%	50%	34%	Assessment includes auditory screening
1.2.9.2	73%	83%	76%	Assessment includes visual & auditory acuity
1.2.12.3	16%	56%	26%	Individual receives annual assessment
1.3.1	55%	89%	64%	Individual has program plan
1.3.2	93%	100%	95%	Program plan developed by I.D. team
1.3.2.1.1	36%	44%	38%	Program plan developed with participation of individual
1.3.3	88%	100%	91%	Program plan states objectives
1.3.3.1	54%	94%	64%	Program plan's objectives reflect individual's needs
1.3.3.2.1	68%	78%	70%	Program plan's objectives are stated separately
1.3.3.2.2	29%	61%	36%	Program plan objectives assigned completion dates
1.3.3.2.3	66%	83%	70%	Program plan objectives in behavioral terms
1.3.3.2.4	14%	56%	24%	Plan objectives sequenced with appropriate progression
1.3.3.2.5	21%	61%	31%	Program plan's objectives are assigned priorities
1.3.7	70%	100%	77%	I.D. team reviews program plan monthly
1.3.7.1	77%	89%	80%	Individual's response recorded by I.D. team monthly
1.3.7.3	36%	94%	50%	I.D. team reviews program plan when problems occur
1.3.8.1	50%	67%	54%	Program plan review assesses individual's response
1.3.8.2	36%	50%	39%	Program plan review modifies the individual's activities
1.3.8.3	7%	61%	20%	Program plan review determines services needed
1.4.1.4	5%	44%	15%	Services provided for sensorimotor deficits
1.4.1.5.3	34%	56%	39%	Mechanical supports integral part of program plan
1.4.1.5.3.4	45%	72%	51%	Plan with support gives reason, situations, and time used
1.4.1.8	13%	50%	22%	Incontinent individuals are bathed after soiling
1.4.1.10.2	32%	61%	39%	Height and wt. records are kept until maximum growth age
1.4.1.19.2	73%	83%	76%	Individual medication record includes current profile
1.4.3.1	14%	56%	24%	Training in self-help developed by I.D. team
1.4.3.2.2	11%	67%	24%	Training program specifies methods to be used
1.4.3.2.3	20%	56%	28%	Training program specifies the training schedule
1.4.3.2.5	39%	94%	53%	Training program specifies assessment data
1.4.4.3.1	63%	100%	72%	Agency determines work interests
1.4.4.3.2	59%	100%	69%	Agency measures individual's work abilities
1.4.4.3.3	59%	100%	69%	Agency measures individual's task performance
1.4.4.3.5	43%	83%	53%	Agency assesses attitude for employment
1.4.4.4	70%	100%	77%	Agency utilizes work evaluation for employment program
1.4.4.4.2	21%	56%	30%	Individual work performance records are organized

1.4.6.8	32%	94%	47%	Plan to modify behavior teaches appropriate behavior
1.4.6.8.1.5	9%	44%	18%	Plan to modify behavior specifies data to be collected
1.4.6.8.2	43%	67%	49%	Less restrict. documented if restraint, Rx, behav. mod used
1.4.6.9.1	30%	72%	41%	Restraint used only as part of plan developed by I.D.
1.4.6.9.1.1.3	9%	44%	18%	Plan using restraint specifies schedule for use of method
1.4.6.9.1.1.4	11%	44%	19%	Plan using restraint states person responsible for program
1.4.6.9.1.1.5	11%	50%	20%	Plan using restraint states data collected to show progress
1.4.6.9.1.2.1	36%	67%	43%	Plan using restraint approved by behav. manage. committee
1.4.6.9.1.2.2	34%	67%	42%	Plan using restraint approved by human rights committee
1.4.6.9.1.3	27%	56%	34%	Individual's record shows uses of restraint with reason
1.4.6.9.2.1.1	9%	50%	19%	Standing or PRN orders for restraint are not used
1.4.6.10.1	54%	83%	61%	If drugs for behavior mgt., only as integral to Plan
1.4.6.10.1.1	43%	72%	50%	If drugs for behav. mgt., M.D. time-span, and data collect.
1.4.6.10.1.2	71%	83%	74%	Plan documents weighing of potential harmful effects
1.4.6.10.1.4.1	71%	83%	74%	Behavior mgt. committee reviews each drug plan
1.4.6.10.1.4.2	71%	83%	74%	Human rights committee reviews each drug plan
1.4.6.11.2	41%	22%	36%	Plan that uses time-out devices has consent of indiv., fam.
1.5.2.1	91%	100%	93%	Individual's program coordinator attends to needs
1.5.2.2	54%	89%	62%	Individual's program coordinator obtains services needed
1.6.5.1	41%	72%	49%	Individual's record is legible
1.6.5.2	50%	83%	58%	Individual's record is dated
1.6.5.3	39%	67%	46%	Individual's record entries authenticated by signature

ALTERNATIVE LIVING ARRANGEMENTS (N=26)

2.1.6	50%	61%	53%	Living arrangements used give access to services & act.
2.1.7	96%	83%	93%	Living arrangements used are integrated within community
2.1.10.3.5	54%	89%	62%	Resident provided with appropriate furniture
2.1.11	34%	78%	45%	"Rhythm of life" in accordance with norm
2.1.11.2	46%	56%	50%	Resident has access to to quiet, private area
2.1.11.9	23%	56%	31%	Residents encouraged to have personal possessions
2.1.11.9.1	73%	94%	78%	Residents have individual toilet articles
2.1.13	11%	50%	20%	Resident has allowance of clean, seasonable clothing
2.1.13.1	16%	50%	24%	Residents have and wear their own clothing
2.1.13.4	45%	56%	47%	Storage space provided for resident
2.1.17.1.2	25%	50%	31%	Residents bathe or are bathed with regard to privacy
2.5.1.1.1	59%	89%	66%	Living unit comp. arranged to assure develop. of relationships
2.5.1.1.4	70%	67%	69%	Different ages, levels, & needs not housed together
2.5.1.3.4	88%	94%	89%	Interior design of unit simulates arrangements of a home
2.5.1.3.7	63%	61%	62%	Furnishings are safe, appropriate, comfortable, & homelike
2.5.1.3.9	34%	50%	38%	Toilet areas & facilities equipped to facilitate training
2.5.1.3.10.1	86%	94%	88%	Toilets, showers, baths approximate normal configurations
2.5.1.3.10.2	36%	50%	39%	Toilets, showers, & bathtubs provide for privacy
2.5.2.1.1	7%	56%	19%	Staff train residents in daily living activities
2.5.2.3	23%	44%	28%	Person assigned to give a program of care, training, rec.
2.5.2.4.1	41%	22%	36%	Staff participates with I.D. team in regard to progam plan
2.5.2.4.3	9%	44%	18%	Effective channels of communication among programs & serv.
2.5.2.5	13%	67%	26%	Act. schedule for resident available to staff & used daily
2.5.2.5.1	23%	67%	34%	Act. schedules don't permit 'dead time' of over one hour
2.5.2.5.2	29%	50%	34%	Act. schedules allow for indiv. or group free activities
2.5.2.8	59%	50%	57%	Title applied to living-unit staff is appropriate

ACHIEVING & PROTECTING RIGHTS (N=4)

3.1.4	63%	100%	72%	Disabled person's rights not limited without due process
3.1.12	27%	50%	32%	Individual's record is confidential
3.1.13	41%	61%	46%	Record has appropriate authorizations and consents
3.1.18.1	23%	56%	31%	Undignified displays or exhibitions of individuals avoided

INDIVIDUAL PROGRAM SUPPORT (N=12)

4.1.1.1	100%	89%	97%	Agency accepts and implements principle of normalization
4.1.1.2	36%	78%	46%	Agency uses least restrictive alternatives
4.1.6.1	43%	61%	47%	Outside contracts stipulate same quality as in standards
4.6.1	34%	78%	45%	All individuals receive professional service needed
4.6.2	30%	72%	41%	Services operated by agency equals quality provided to all
4.7.1.1	54%	83%	61%	Agency has sufficient staff
4.10.4.2.2	25%	78%	38%	Record documents sex, height, wt., hair & eye color, photo
4.10.4.4	16%	50%	24%	Record includes AAMD diagnosis
4.11.1	20%	56%	28%	Agency at least annually evaluates goals and objectives
4.11.3	45%	78%	53%	Effect measured based on individuals' plan objectives
4.12.2.2	32%	50%	36%	Toilet tissue accessible at each toilet
4.12.4	89%	83%	88%	Dining areas provide pleasant and normalizing environment

SAFETY & SANITATION (N=2)

5.3.3	29%	50%	34%	Quarterly evacuation drills each shift
5.5.1	25%	56%	32%	Agency's premises are sanitary and free of offensive odors

RESEARCH & RESEARCH UTILIZATION (N=0)

THE AGENCY IN THE SERVICE DELIVERY SYSTEM (N=0)

CRITICAL AC MRDD "A" STANDARDS @ 40% CRITERION
FOR 28 SMALL RESIDENTIAL AGENCIES

	A %	NA %	TOT %	
STANDARD #	(17)	(11)	(28)	
INDIVIDUAL PROGRAM PLANNING & IMPLEMENTATION (N=59)				
1.1.2	35%	91%	57%	I.D. team properly constituted
1.1.2.1	6%	45%	21%	I.D. team works with professionals
1.2.7.2	12%	55%	29%	I.D. team identifies developmental strengths
1.2.7.3	12%	55%	29%	I.D. team identifies developmental needs
1.2.8.2	29%	45%	36%	Assessment includes dental evaluation
1.2.8.3	47%	73%	57%	Assessment includes medication history
1.2.8.4	88%	82%	86%	Assessment includes nutritional status
1.2.8.5	41%	82%	57%	Assessment includes visual screening
1.2.8.6	35%	82%	54%	Assessment includes auditory screening
1.2.8.7	24%	82%	46%	Assessment includes speech & language screening
1.2.8.8	12%	55%	29%	Assessment includes social assessment
1.2.9.2	59%	91%	71%	Assessment includes visual & auditory acuity
1.2.11	35%	64%	46%	Assessment completed within 30 days of enrollment
1.2.12.3	18%	64%	36%	Individual receives annual assessment
1.2.12.4	29%	73%	46%	Health assessments regularly; at least annual
1.3.1	29%	55%	39%	Individual has program plan
1.3.1.1	12%	55%	29%	Program plan developed within 30 days of enrollment
1.3.2	82%	91%	86%	Program plan developed by I.D. team
1.3.2.1.1	6%	45%	21%	Program plan developed with participation of individual
1.3.3	88%	100%	93%	Program plan states objectives
1.3.3.1	41%	100%	64%	Program plan's objectives reflect individual's needs
1.3.3.2.1	41%	82%	57%	Program plan's objectives are stated separately
1.3.3.2.2	41%	64%	50%	Program plan objectives assigned completion dates
1.3.3.2.3	65%	73%	68%	Program plan objectives in behavioral terms
1.3.3.2.5	18%	45%	29%	Program plan's objectives are assigned priorities
1.3.7	65%	100%	79%	I.D. team reviews program plan monthly
1.3.7.1	71%	91%	79%	Individual's response recorded by I.D. team monthly
1.3.7.3	29%	73%	46%	I.D. team reviews program plan when problems occur
1.3.8.1	35%	73%	50%	Program plan review assesses individual's response
1.4.1.3.3	6%	45%	21%	Preventive health surveys to detect communicable diseases
1.4.1.7.2.1	53%	73%	61%	Modified diets are prescribed by I.D. team
1.4.1.10	18%	45%	29%	Individual's weight recorded quarterly
1.4.1.11.3	6%	73%	32%	Agency has policy on drug administration routine
1.4.1.14	59%	100%	75%	Prescription drug orders reviewed by date
1.4.1.19.2	71%	100%	82%	Individual medication record profiles med response
1.4.1.20	12%	73%	36%	Agency policies on detection of injuries, abuse
1.4.1.21.1	6%	45%	21%	Posted telephone number of poison control center
1.4.3.2.3	29%	55%	39%	Training program specifies the training schedule
1.4.3.2.5	29%	73%	46%	Training program specifies assessment data
1.4.4.3.1	65%	100%	79%	Agency determines work interests
1.4.4.3.2	71%	91%	79%	Agency measures individual's work abilities
1.4.4.3.3	71%	82%	75%	Agency measures individual's task performance
1.4.4.3.5	24%	82%	46%	Agency assesses attitude for employment
1.4.4.4	71%	91%	79%	Agency utilizes work evaluation for employment program
1.4.4.4.2	41%	27%	36%	Individual work performance records are organized

1.4.6.1.1	24%	64%	39%	Behavior management policies maximize growth/development
1.4.6.1.4	24%	82%	46%	Individual participates in behavior mgt. policies
1.4.6.8	41%	91%	61%	Plan to modify behavior teaches appropriate behavior
1.4.6.8.1.5	6%	45%	21%	Plan to modify behavior specifies data to be collected
1.4.6.8.2	24%	64%	39%	Less restrict. documented if restraint, Rx, behav. mod used
1.4.6.10.1	53%	100%	71%	If drugs for behavior mgt., only as integral to Plan
1.4.6.10.1.1	41%	100%	64%	If Rx for behavior mgt., M.D. time-span, and data collect.
1.4.6.10.1.2	35%	100%	61%	Plan documents weighing of potential harmful effects
1.4.6.10.1.4.1	41%	100%	64%	Behavior mgt. committee reviews each drug plan
1.4.6.10.1.4.2	35%	100%	61%	Human rights committee reviews each drug plan
1.5.2.1	100%	100%	100%	Individual's program coordinator attends to needs
1.5.2.2	71%	100%	82%	Individual's program coordinator obtains services needed
1.6.5.2	88%	91%	89%	Individual's record is dated
1.6.5.3	59%	73%	64%	Individual's record entries authenticated by signature

ALTERNATIVE LIVING ARRANGEMENTS (N=1)

2.5.2.5	18%	55%	32%	Act. schedule for resident available to staff & used daily

ACHIEVING & PROTECTING RIGHTS (N=7)

3.1.2.1	0%	45%	18%	Individuals & families have written summary of rights
3.1.4	35%	100%	61%	Disabled person's rights not limited without due process
3.1.10	6%	73%	32%	Policy protecting individuals from work exploitation
3.1.12	53%	64%	57%	Individual's record is confidential
3.1.13	41%	55%	46%	Record has appropriate authorizations and consents
3.2.1.1	0%	45%	18%	Agency provides citizenship training program
3.3.2.2	12%	45%	25%	I.D. addresses guardian. needs, especially at majority

INDIVIDUAL PROGRAM SUPPORT (N=19)

4.1.1.1	65%	82%	71%	Agency accepts and implements principle of normalization
4.1.6.1	47%	45%	46%	Outside contracts stipulate same quality as in standards
4.3.11	24%	64%	39%	Medical eval within one week of residential admission
4.6.1	29%	55%	39%	All individuals receive professional service needed
4.8.1.6	6%	55%	25%	Staff training program in the interdisciplinary approach
4.8.1.9	0%	45%	18%	Staff training program in administering first aid
4.8.2.1	0%	45%	18%	Contact staff are trained in finding signs of illness
4.8.2.2	0%	45%	18%	Contact staff are trained in skills required for health
4.8.2.4	6%	45%	21%	Only instructed work with seiz. disorder, phys. handicap
4.8.3	6%	73%	32%	Employee's record shows completion of training
4.10.1.13	53%	64%	57%	Agency has implemented continuing management audit
4.10.3.5	6%	64%	29%	Policy assures employ. with diseases put in low-risk areas
4.10.4.2.2	35%	73%	50%	Record documents sex, height, wt., hair & eye color, photo
4.10.4.2.6	12%	45%	25%	Record documents legal competency status
4.10.4.2.7	18%	55%	32%	Record documents lanaguage(s) spoken/understood at home
4.10.4.4	47%	64%	54%	Record includes AAMD diagnosis
4.10.4.5	24%	45%	32%	Understandable legend for symbols and abbreviations
4.11.1	71%	73%	71%	Agency at least annually evaluates goals and objectives
4.11.3	65%	100%	79%	Effect measured based on objectives in individuals' plans

SAFETY & SANITATION (N=4)

5.1	6%	45%	21%	Requirements of Life Safety Code are met in all buildings
5.3	0%	55%	21%	Agency has written staff organization plan and procedures
5.3.1.1	6%	45%	21%	Procedures for emergencies include assignment of personnel
5.3.1.3	6%	55%	25%	Plan for methods of fire containment
5.3.1.5	0%	64%	25%	Plan for location of fire-fighting equip.
5.3.1.6	0%	45%	18%	Procedures for emergencies include evacuation routes
5.3.3	41%	91%	61%	Quarterly evacuation drills each shift
5.3.3.5	47%	55%	50%	Written, filed report assessing each evacuation drill
5.4.1	6%	55%	25%	Safety program by multidisciplinary safety committee
5.5.5	47%	45%	46%	Buildings free of insects, rodents and vermin
5.6.3	12%	55%	29%	Poisons, internal & external drugs are stored separately

RESEARCH & RESEARCH UTILIZATION (N=0)

THE AGENCY IN THE SERVICE DELIVERY SYSTEM (N=0)

CRITICAL AC MRDD "A" STANDARDS @ 40% CRITERION
FOR 84 PRIMARILY NON-RESIDENTIAL AGENCIES

INDIVIDUAL PROGRAM PLANNING & IMPLEMENTATION (N=72)

STANDARD #	A % (58)	NA % (26)	TOT % (84)	
1.1.1	22%	62%	35%	I.D. team identified for each individual
1.1.2	40%	85%	54%	I.D. team properly constituted
1.1.2.1	21%	42%	27%	I.D. team works with professionals
1.2.2.1	19%	65%	33%	Agency refers individual to other agencies
1.2.6.7	9%	42%	19%	Assessment includes adaptive behav. or ind. living skills
1.2.7.2	14%	62%	29%	I.D. team identifies developmental strengths
1.2.7.3	16%	54%	27%	I.D. team identifies developmental needs
1.2.7.4	17%	50%	27%	Identifies needs whether available or not
1.2.8.2	22%	81%	40%	Assessment includes dental evaluation
1.2.8.3	64%	65%	64%	Assessment includes medication history
1.2.8.4	76%	92%	81%	Assessment includes nutritional status
1.2.8.5	45%	88%	58%	Assessment includes visual screening
1.2.8.6	45%	85%	57%	Assessment includes auditory screening
1.2.8.6.1	19%	42%	26%	Assessment comprehensive audio. assessment when indicated
1.2.8.7	33%	77%	46%	Assessment includes speech & language screening
1.2.8.8	14%	58%	27%	Assessment includes social assessment
1.2.9.2	59%	88%	68%	Assessment includes visual & auditory acuity
1.2.11	36%	85%	51%	Assessment completed within 30 days of enrollment
1.2.12.3	14%	62%	29%	Individual receives annual assessment
1.2.12.4	55%	88%	65%	Health assessments regularly; at least annual
1.3.1	36%	73%	48%	Individual has program plan
1.3.1.1	19%	58%	31%	Program plan developed within 30 days of enrollment
1.3.2	95%	100%	96%	Program plan developed by I.D. team
1.3.3	91%	96%	93%	Program plan states objectives
1.3.3.1	66%	96%	75%	Program plan's objectives reflect individual's needs
1.3.3.2.1	55%	92%	67%	Program plan's objectives are stated separately
1.3.3.2.2	36%	65%	45%	Program plan objectives assigned completion dates
1.3.3.2.3	72%	88%	77%	Program plan objectives in behavioral terms
1.3.3.2.5	24%	54%	33%	Program plan's objectives are assigned priorities
1.3.7	72%	100%	81%	I.D. team reviews program plan monthly
1.3.7.1	78%	88%	81%	Individual's response recorded by I.D. team monthly
1.3.7.3	34%	65%	44%	I.D. team reviews program plan when problems occur
1.3.8.1	43%	62%	49%	Program plan review assesses individual's response
1.3.8.2	16%	46%	25%	Program plan review modifies the individual's activities
1.4.0.1	10%	42%	20%	Contiuum of education, training, & retraining meets needs
1.4.1.1	12%	42%	21%	Agency has written procedures for health care
1.4.1.4	14%	42%	23%	Services provided for treatment of sensorimotor deficits
1.4.1.7.2.1	50%	92%	63%	Modified diets are prescribed by I.D. team
1.4.1.10	38%	88%	54%	Individual's weight recorded quarterly
1.4.1.10.3	14%	54%	26%	Agency shows efforts to help indiv. in keeping normal wts.
1.4.1.11.3	7%	58%	23%	Agency has policy on drug administration routine
1.4.1.14	66%	65%	65%	Prescription drug orders reviewed by date
1.4.1.19.2	86%	100%	90%	Individual medication record profiles med response
1.4.1.20	14%	54%	26%	Agency policies on detection of injuries, abuse

1.4.3.1	12%	58%	26%	Training in self-help developed by I.D. team
1.4.3.2.2	28%	50%	35%	Training program specifies methods to be used
1.4.3.2.3	31%	69%	43%	Training program specifies the training schedule
1.4.3.2.5	47%	92%	61%	Training program specifies assessment data
1.4.4.2	5%	42%	17%	Agency has program of orientation to work & employment
1.4.4.3.1	40%	88%	55%	Agency determines work interests
1.4.4.3.2	48%	88%	61%	Agency measures individual's work abilities
1.4.4.3.3	47%	88%	60%	Agency measures individual's task performance
1.4.4.3.5	28%	73%	42%	Agency assesses attitude for employment
1.4.4.4	48%	81%	58%	Agency utilizes work evaluation for employment program
1.4.4.4.1	10%	42%	20%	Agency's work evaluation is standardized
1.4.4.4.2	28%	81%	44%	Individual work performance records are organized
1.4.4.6.2	34%	46%	38%	Training includes developing skills to identified jobs
1.4.6.1.4	24%	58%	35%	Individual participates in behavior mgt. policies
1.4.6.6	9%	46%	20%	Policy defines staff & monitoring for behavior mod. prog.
1.4.6.8	40%	92%	56%	Plan to modify behavior teaches appropriate behavior
1.4.6.8.1.5	16%	42%	24%	Plan to modify behavior specifies data to be collected
1.4.6.8.2	36%	65%	45%	Less restrict. documented if restraint, Rx, behav. mod used
1.4.6.10.1	71%	100%	80%	If drugs for behavior mgt., only as integral to Plan
1.4.6.10.1.1	76%	100%	83%	If Rx for behavior mgt., M.D. time-span, and data collect.
1.4.6.10.1.2	72%	100%	81%	Plan documents weighing of potential harmful effects
1.4.6.10.1.4.1	72%	100%	81%	Behavior mgt. committee reviews each drug plan
1.4.6.10.1.4.2	74%	100%	82%	Human rights committee reviews each drug plan
1.5.2.1	93%	100%	95%	Individual's program coordinator attends to needs
1.5.2.2	62%	100%	74%	Individual's program coordinator obtains services needed
1.6.5.1	31%	46%	36%	Individual's record is legible
1.6.5.2	67%	96%	76%	Individual's record is dated
1.6.5.3	55%	88%	65%	Individual's record entries authenticated by signature

ALTERNATIVE LIVING ARRANGEMENTS (N=0)

ACHIEVING & PROTECTING RIGHTS (N=7)

3.1.4	72%	100%	81%	Disabled person's rights not limited without due process
3.1.7	3%	42%	15%	Agency has human right's committee
3.1.10	3%	42%	15%	Policy protecting individuals from work exploitation
3.1.12	47%	81%	57%	Individual's record is confidential
3.1.13	45%	62%	50%	Record has appropriate authorizations and consents
3.2.1.1	5%	54%	20%	Agency provides citizenship training program
3.3.2.2	26%	69%	39%	I.D. addresses guardianship needs, especially at majority

INDIVIDUAL PROGRAM SUPPORT (N=24)

4.1.1.1	62%	81%	68%	Agency accepts and implements principle of normalization
4.1.6.1	38%	42%	39%	Outside contracts stipulate same quality as in standards
4.3.13.1	21%	46%	29%	Discharge includes brief summary of findings & progress
4.6.1	31%	54%	38%	All individuals receive professional service needed
4.6.2	17%	46%	26%	Services operated by agency equals quality provided to all
4.6.3	3%	50%	18%	Effective arrangements with other agencies, practitioners
4.7.1.1	22%	54%	32%	Agency has sufficient staff
4.8.1	3%	50%	18%	Agency provides staff training program
4.8.3	14%	77%	33%	Employee's record shows completion of training
4.10.1.9.2	7%	50%	20%	Standing committees meet regularly
4.10.1.13	28%	77%	43%	Agency has implemented continuing management audit
4.10.3.12.1	2%	50%	17%	Agency conducts exit interviews
4.10.4.2.1	14%	54%	26%	Record shows name, entry date, birth, marital, & s.s. #
4.10.4.2.2	33%	77%	46%	Record documents sex, height, wt., hair & eye color, photo
4.10.4.2.4	5%	50%	19%	Record documents parental birth, marital information
4.10.4.2.5	5%	46%	18%	Record documents reason for entry, referral
4.10.4.2.6	7%	46%	19%	Record documents legal competency status
4.10.4.2.7	14%	54%	26%	Record documents lanaguage(s) spoken/understood at home
4.10.4.2.12	3%	50%	18%	Record documents age at onset of disability
4.10.4.2.15	5%	42%	17%	Record documents allergies
4.10.4.4	48%	88%	61%	Record includes AAMD diagnosis
4.10.4.5	2%	54%	18%	Understandable legend for symbols and abbreviations
4.11.1	31%	81%	46%	Agency at least annually evaluates goals and objectives
4.11.3	38%	92%	55%	Effect measured based on objectives in individuals' plans

SAFETY & SANITATION (N=6)

5.3	7%	46%	19%	Agency has written staff organization plan and procedures
5.3.1.3	14%	50%	25%	Plan for methods of fire containment
5.3.1.5	7%	50%	20%	Plan for location of fire-fighting equip.
5.3.3	26%	62%	37%	Quarterly evacuation drills each shift
5.3.3.5	34%	62%	43%	Written, filed report assessing each evacuation drill
5.5.5	17%	50%	27%	Buildings free of insects, rodents and vermin

RESEARCH & RESEARCH UTILIZATION (N=0)

THE AGENCY IN THE SERVICE DELIVERY SYSTEM (N=0)

APPENDIX #6

RANKING OF CRITICAL STANDARDS FOR ALL AGENCIES

Appendix #6 provides a ranking of Category A standards in terms of the percentage of all 186 currently surveyed agencies which were found to be in less than full compliance. This includes all Category A standards except the 162 with which no agency was found to be in less than full compliance (see Appendix #8). Following the ranking from highest to lowest percentage of these "over-all" critical standards, the corresponding percentages for each of the five types of agencies are indicated. For example, it is possible to identify a particular standard which was critical for large private residential agencies, and then to determine corresponding percentages for each of the other four types of agencies.

APPENDIX # 6

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
267	1.5.2.1	95%	93%	93%	100%	95%	100%
57	1.3.2	94%	93%	100%	86%	96%	100%
62	1.3.3	92%	88%	100%	93%	92%	100%
130	1.4.1.19.2	83%	70%	100%	82%	91%	90%
73	1.3.7.1	80%	77%	93%	79%	81%	80%
496	4.1 1.1	80%	97%	100%	71%	66%	80%
72	1.3.7	79%	77%	79%	79%	78%	100%
251	1.4.6.10.1.4.1	76%	73%	79%	64%	82%	70%
252	1.4.6.10.1.4.2	76%	75%	71%	61%	64%	70%
250	1.4.6.10.1.2	75%	72%	86%	61%	82%	70%
400	3.1.4	74%	70%	79%	61%	82%	70%
66	1.3.3.2.3	73%	67%	86%	68%	77%	80%
36	1.2.9.2	72%	77%	71%	71%	66%	80%
248	1.4.6.10.1	71%	58%	71%	71%	81%	70%
292	1.6.5.2	71%	55%	71%	89%	77%	70%
268	1.5.2.2	70%	65%	50%	82%	73%	80%
63	1.3.3.1	69%	67%	50%	64%	76%	70%
175	1.4.4.4	69%	80%	64%	79%	58%	60%
249	1.4.6.10.1.1	67%	47%	64%	64%	86%	60%
64	1.3.3.2.1	67%	67%	86%	57%	65%	80%
171	1.4.4.3.2	67%	70%	64%	79%	61%	60%
172	1.4.4.3.3	66%	72%	57%	75%	59%	60%
170	1.4.4.3.1	65%	72%	71%	79%	53%	70%
27	1.2.8.4	58%	15%	43%	86%	81%	80%
28	1.2.8.5	58%	58%	50%	57%	57%	70%
293	1.6.5.3	58%	42%	64%	64%	66%	60%
744	4.11.3	58%	52%	57%	79%	55%	50%
158	1.4.3.2.5	55%	52%	57%	46%	61%	60%
222	1.4.6.8	53%	49%	43%	61%	59%	30%
54	1.3.1	53%	62%	71%	39%	45%	70%
78	1.3.8.1	51%	53%	57%	50%	46%	70%
123	1.4.1.14	50%	18%	43%	75%	69%	40%
26	1.2.8.3	48%	20%	50%	57%	64%	70%
46	1.2.12.4	48%	30%	21%	46%	62%	90%
439	3.1.13	48%	45%	50%	46%	55%	10%
3	1.1.2	47%	38%	29%	57%	57%	30%
30	1.2.8.6	47%	30%	50%	54%	57%	60%
434	3.1.12	47%	30%	43%	57%	57%	60%
74	1.3.7.3	47%	48%	57%	46%	43%	50%
174	1.4.4.3.5	47%	53%	50%	46%	41%	50%
228	1.4.6.8.2	46%	47%	57%	39%	45%	50%
732	4.10.4.4	45%	17%	57%	54%	62%	50%
508	4.1.6.1	44%	43%	64%	46%	36%	60%
717	4.10.4.2.2	44%	33%	57%	50%	43%	70%
301	2.1.7	43%	97%	79%	7%	11%	10%
743	4.11.1	43%	25%	43%	71%	46%	50%
65	1.3.3.2.2	42%	33%	50%	50%	42%	70%
605	4.7.1.1	42%	67%	36%	25%	34%	20%
2	1.1.1	41%	55%	57%	25%	31%	60%
107	1.4.1.7.2.1	41%	3%	36%	61%	64%	60%
374	2.5.1.3.10.1	41%	87%	93%	21%	7%	10%
560	4.6.1	41%	45%	43%	39%	39%	30%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
41	1.2.11	39%	23%	21%	46%	49%	70%
291	1.6.5.1	39%	50%	43%	25%	31%	70%
369	2.5.1.3.4	39%	90%	86%	14%	3%	10%
754	4.12.4	39%	87%	79%	21%	5%	0%
770	5.3.3	39%	32%	43%	61%	39%	20%
177	1.4.4.4.2	37%	33%	14%	36%	47%	20%
103	1.4.1.5.3.4	37%	53%	43%	11%	31%	40%
156	1.4.3.2.3	37%	27%	36%	39%	41%	60%
366	2.5.1.1.4	35%	73%	50%	14%	9%	30%
775	5.3.3.5	35%	17%	36%	50%	45%	30%
215	1.4.6.1.4	34%	32%	21%	46%	32%	50%
484	3.3.2.2	34%	32%	36%	25%	45%	0%
311	2.1.10.3.5	33%	63%	57%	14%	11%	40%
328	2.1.11.9.1	33%	78%	71%	4%	4%	10%
673	4.10.1.13	33%	12%	21%	57%	43%	40%
799	5.5.5	33%	37%	29%	46%	28%	20%
32	1.2.8.7	32%	8%	21%	46%	46%	50%
68	1.3.3.2.5	32%	28%	43%	27%	31%	50%
299	2.1.6	31%	53%	50%	18%	16%	10%
4	1.1.2.1	30%	28%	64%	21%	28%	20%
113	1.4.1.10	30%	3%	0%	29%	54%	50%
77	1.3.8.2	29%	45%	14%	14%	26%	20%
48	1.2.12.3	28%	23%	36%	36%	27%	40%
179	1.4.4.6.2	28%	22%	14%	21%	39%	30%
99	1.4.1.5.3	28%	43%	21%	7%	26%	20%
566	4.6.2	28%	40%	43%	0%	30%	0%
115	1.4.1.10.2	27%	40%	36%	14%	16%	60%
155	1.4.3.2.2	27%	25%	21%	14%	31%	60%
364	2.5.1.1.1	27%	61%	64%	4%	1%	0%
497	4.1.1.2	27%	47%	43%	21%	12%	20%
21	1.2.7.2	27%	22%	36%	29%	28%	30%
633	4.8.3	27%	20%	7%	32%	32%	40%
370	2.5.1.3.7	26%	72%	21%	4%	1%	10%
22	1.2.7.3	26%	22%	29%	29%	27%	30%
25	1.2.8.2	26%	3%	14%	36%	38%	60%
67	1.3.3.2.4	25%	25%	21%	21%	28%	20%
58	1.3.2.1.1	25%	43%	14%	21%	14%	20%
391	2.5.2.8	25%	63%	29%	0%	3%	20%
722	4.10.4.2.7	25%	18%	29%	32%	22%	60%
55	1.3.1.1	24%	13%	21%	29%	31%	30%
23	1.2.7.4	24%	17%	36%	21%	28%	20%
153	1.4.3.1	24%	27%	14%	14%	26%	30%
315	2.1.11.2	22%	57%	21%	0%	5%	0%
29	1.2.8.5.1	22%	18%	7%	4%	32%	50%
131	1.4.1.20	22%	3%	43%	36%	23%	50%
230	1.4.6.9.1	22%	42%	36%	4%	11%	10%
387	2.5.2.5	22%	25%	29%	32%	16%	0%
157	1.4.3.2.4	21%	23%	29%	18%	16%	40%
212	1.4.6.1.1	21%	8%	29%	39%	24%	10%
227	1.4.6.8.1.5	21%	15%	29%	21%	24%	20%
236	1.4.6.9.1.2.1	21%	43%	43%	4%	8%	0%
337	2.1.13.4	21%	57%	7%	0%	3%	20%

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747	4.12.1	21%	20%	36%	11%	24%	10%
9	1.2.2.1	20%	2%	21%	21%	31%	50%
34	1.2.6.8	20%	6%	14%	29%	26%	40%
237	1.4.6.9.1.2.2	20%	42%	43%	4%	8%	0%
31	1.2.6.6.1	20%	13%	14%	18%	24%	40%
257	1.4.6.11.4	19%	37%	29%	7%	9%	10%
313	2.1.11	19%	48%	29%	4%	1%	10%
537	4.3.13.1	19%	10%	0%	21%	28%	30%
733	4.10.4.5	19%	13%	29%	32%	18%	20%
752	4.12.2.2	19%	43%	7%	14%	7%	0%
176	1.4.4.4.1	19%	18%	14%	18%	23%	0%
238	1.4.6.9.1.3	19%	35%	29%	7%	9%	10%
375	2.5.1.3.10.2	19%	43%	21%	11%	3%	10%
384	2.5.2.4.1	19%	32%	57%	0%	9%	10%
458	3.2.1.1	19%	18%	14%	18%	23%	0%
479	3.2.3.1	19%	13%	43%	29%	15%	20%
197	1.4.4.14.2	18%	13%	14%	29%	19%	20%
294	1.6.6	18%	20%	21%	21%	14%	30%
664	4.10.1.9.4	18%	23%	0%	11%	19%	30%
721	4.10.4.2.6	18%	10%	36%	25%	19%	20%
765	5.3.1.3	18%	5%	21%	25%	26%	20%
96	1.4.1.4	18%	13%	21%	11%	24%	10%
255	1.4.6.11.2	18%	38%	29%	4%	5%	10%
142	1.4.2.3 3	17%	10%	21%	18%	23%	10%
226	1.4.6.8.1.4	17%	15%	21%	14%	16%	40%
532	4.3.11	17%	2%	14%	39%	23%	10%
716	4.10.4.2.1	17%	3%	21%	18%	24%	40%
745	4.11.5	17%	28%	14%	14%	11%	10%
787	5.5.1	17%	40%	0%	11%	5%	10%
759	5.1	17%	27%	14%	21%	9%	0%
767	5.3.1.5	17%	7%	21%	25%	19%	30%
120	1.4.1.11.3	16%	0%	14%	32%	23%	20%
224	1.4.6.8.1.2	16%	17%	21%	18%	14%	20%
314	2.1.11.1	16%	45%	7%	4%	1%	0%
749	4.12.1.2	16%	18%	7%	18%	16%	10%
199	1.4.4.14.4	16%	15%	21%	25%	12%	10%
254	1.4.6.11.1.2	16%	32%	43%	4%	4%	0%
373	2.5.1.3.9	16%	42%	21%	0%	0%	10%
480	3.2.3.3	16%	7%	14%	18%	25%	10%
803	5.6.3	16%	5%	21%	29%	18%	20%
840	7.1.5.2	16%	17%	36%	21%	11%	0%
59	1.3.2.1.2	15%	10%	7%	21%	16%	30%
95	1.4.1.3.3	15%	2%	7%	21%	23%	30%
114	1.4.1.10.1	15%	17%	14%	4%	14%	50%
140	1.4.2.3.1	15%	8%	21%	11%	23%	0%
389	2.5.2.5.2	15%	37%	21%	4%	3%	0%
453	3.1.18.1	15%	33%	21%	4%	4%	10%
719	4.10.4.2.4	15%	12%	14%	11%	20%	10%
33	1.2.6.7.1	15%	10%	7%	11%	19%	30%
78	1.3.6.3	15%	17%	0%	21%	15%	0%
116	1.4.1.10.3	15%	0%	7%	14%	28%	30%
253	1.4.6.11.1.1	15%	27%	36%	4%	4%	20%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
704	4.10.3.5	15%	8%	29%	29%	11%	20%
121	1.4.1.12	14%	3%	29%	14%	20%	10%
196	1.4.4.14.3	14%	13%	7%	25%	11%	20%
320	2.1.11.5.2	14%	22%	7%	14%	9%	10%
454	3.1.19	14%	13%	21%	14%	12%	20%
19	1.2.6.7	13%	3%	29%	11%	19%	20%
38	1.2.10	13%	5%	21%	18%	18%	10%
91	1.4.1.1	13%	2%	7%	18%	22%	20%
169	1.4.4.2	13%	15%	7%	4%	18%	10%
220	1.4.6.6	13%	3%	7%	18%	22%	10%
269	1.5.2.5	13%	12%	7%	14%	18%	0%
270	1.5.2.6	13%	12%	14%	14%	16%	0%
378	2.5.2.1.1	13%	20%	14%	7%	12%	0%
388	2.5.2.5.1	13%	37%	21%	0%	0%	0%
427	3.1.10	13%	3%	7%	32%	16%	10%
632	4.8.2.4	13%	5%	14%	21%	16%	20%
712	4.10.3.12.1	13%	7%	14%	10%	18%	10%
85	1.4.0.1	13%	10%	0%	4%	23%	0%
162	1.4.3.4.6	13%	32%	7%	0%	4%	10%
161	1.4.4.6.4	13%	5%	7%	18%	20%	0%
327	2.1.11.9	13%	33%	21%	0%	0%	10%
341	2.1.17.1.2	13%	35%	21%	4%	0%	0%
386	2.5.2.4.3	13%	20%	7%	4%	14%	0%
539	4.3.13.4	13%	8%	14%	11%	14%	40%
626	4.8.1.6	13%	12%	21%	25%	6%	10%
662	4.10.1.9.2	13%	3%	7%	14%	22%	10%
762	5.3	13%	0%	14%	21%	19%	20%
139	1.4.2.3	12%	3%	14%	18%	18%	10%
182	1.4.4.6.5	12%	13%	7%	18%	12%	0%
223	1.4.6.8.1.1	12%	8%	14%	18%	12%	20%
382	2.5.2.3	12%	27%	36%	4%	0%	10%
611	4.7.6.1	12%	0%	7%	29%	19%	0%
627	4.8.1.7	12%	17%	14%	18%	8%	0%
705	4.10.3.7	12%	13%	7%	14%	11%	20%
777	5.4.1	12%	2%	21%	25%	15%	10%
151	1.4.2.7.6	12%	10%	21%	7%	12%	20%
306	2.1.10.2	12%	35%	7%	0%	0%	0%
562	4.6.1.1.2	12%	8%	7%	4%	20%	0%
715	4.10.4.1	12%	8%	14%	14%	14%	10%
750	4.12.2	12%	17%	0%	4%	15%	0%
841	7.1.6	12%	3%	36%	25%	9%	10%
75	1.3.8	11%	8%	7%	7%	15%	20%
79	1.3.8.4	11%	8%	7%	11%	16%	0%
110	1.4.1.8	11%	25%	7%	0%	5%	10%
241	1.4.6.9.2.1.1	11%	17%	29%	7%	5%	10%
421	3.1.8.8	11%	8%	7%	25%	11%	0%
570	4.6.3	11%	5%	7%	7%	20%	0%
720	4.10.4.2.5	11%	3%	7%	11%	19%	10%
806	5.6.7	11%	5%	14%	14%	14%	20%
180	1.4.4.6.3	11%	13%	7%	11%	11%	0%
838	7.1.3	11%	0%	21%	21%	15%	0%
44	1.2.12.2	10%	15%	14%	7%	8%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
51	1.2.15	10%	12%	0%	14%	8%	20%
119	1.4.1.11.2	10%	2%	7%	11%	18%	10%
221	1.4.6.7.1	10%	12%	21%	0%	12%	0%
242	1.4.6.9.2.2	10%	27%	14%	4%	0%	0%
244	1.4.6.9.2.4	10%	26%	14%	0%	0%	0%
274	1.6.1	10%	7%	21%	4%	12%	20%
432	3.1.10.2.2	10%	6%	0%	7%	14%	20%
522	4.3.5.1	10%	3%	29%	18%	9%	10%
629	4.8.2.1	10%	2%	14%	18%	12%	20%
639	4.9.3	10%	2%	21%	21%	9%	20%
726	4.10.4.2.12	10%	0%	7%	11%	18%	20%
729	4.10.4.2.15	10%	0%	7%	14%	16%	20%
755	4.12.6	10%	3%	0%	29%	12%	0%
35	1.2.8.9	10%	10%	7%	7%	9%	20%
69	1.3.4	10%	7%	14%	4%	12%	20%
141	1.4.2.3.2	10%	10%	14%	7%	11%	0%
176	1.4.4.5	10%	6%	7%	7%	12%	10%
272	1.5.3	10%	7%	7%	7%	15%	0%
319	2.1.11.5.1	10%	25%	7%	4%	1%	0%
335	2.1.13.1	10%	27%	14%	0%	0%	0%
396	3.1.1.2	10%	7%	7%	18%	8%	20%
538	4.3.13.2	10%	7%	0%	4%	14%	30%
561	4.6.1.1.1	10%	7%	0%	14%	14%	0%
763	5.3.1.1	10%	3%	0%	21%	14%	0%
764	5.3.1.2	10%	3%	0%	14%	15%	10%
127	1.4.1.17.1	9%	0%	7%	14%	16%	0%
133	1.4.1.21.1	9%	5%	0%	21%	9%	10%
144	1.4.2.3.4.2	9%	5%	14%	11%	11%	10%
164	1.4.3.4.7.1	9%	22%	0%	0%	5%	0%
173	1.4.4.3.4	9%	7%	0%	14%	12%	0%
196	1.4.4.14.1	9%	2%	14%	14%	14%	0%
235	1.4.6.9.1.1 5	9%	23%	7%	0%	3%	0%
310	2.1.10.3.4	9%	22%	0%	11%	1%	0%
333	2.1.12.4.1	9%	27%	0%	4%	0%	0%
334	2.1.13	9%	23%	7%	0%	3%	0%
371	2.5.1.3.6	9%	10%	0%	29%	4%	0%
398	3.1.2.1	9%	2%	7%	18%	14%	0%
412	3.1.7	9%	0%	14%	7%	18%	0%
516	4.3.1.1	9%	0%	7%	11%	15%	20%
536	4.3.13	9%	3%	14%	18%	11%	0%
565	4.6.1.4	9%	12%	21%	0%	9%	0%
625	4.8.1.4	9%	2%	29%	14%	11%	0%
802	5.6.2	9%	3%	14%	11%	14%	0%
6	1.2.1	9%	5%	14%	11%	11%	0%
106	1.4.1.6.5.2	9%	3%	7%	11%	12%	10%
234	1.4.6.9.1.1.4	9%	18%	21%	4%	1%	0%
630	4.8.2.2	9%	2%	7%	18%	11%	10%
731	4.10.4.3	9%	7%	0%	7%	12%	10%
748	4.12.1.1	9%	18%	14%	0%	4%	0%
766	5.3.1.4	9%	2%	0%	14%	15%	0%
105	1.4.1.6.5.1	8%	3%	7%	7%	11%	20%
126	1.4.1.17	8%	20%	7%	4%	0%	10%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
187	1.4.4.10	8%	8%	0%	7%	11%	0%
225	1.4.6.8.1.3	8%	5%	14%	14%	7%	10%
422	3.1.9	8%	0%	7%	14%	14%	0%
554	4.5.2.1	8%	2%	14%	7%	14%	0%
607	4.7.2	8%	23%	0%	4%	0%	0%
621	4.8.1	8%	0%	0%	0%	19%	10%
710	4.10.3.11.2	8%	0%	21%	14%	11%	0%
779	5.4.2	8%	7%	0%	7%	11%	10%
117	1.4.1.11	8%	0%	7%	18%	11%	0%
186	1.4.4.9	8%	15%	0%	4%	4%	10%
232	1.4.6.9.1.1.2	8%	20%	7%	4%	0%	0%
233	1.4.6.9.1.1.3	8%	18%	14%	4%	0%	0%
266	1.5.1.1	8%	12%	7%	4%	7%	0%
383	2.5.2.4	8%	2%	14%	7%	11%	10%
510	4.2.1	8%	2%	7%	7%	12%	10%
118	1.4.1.11.1	7%	2%	7%	11%	9%	10%
184	1.4.4.8.2	7%	12%	0%	0%	7%	10%
231	1.4.6.9.1.1.1	7%	15%	14%	4%	1%	0%
239	1.4.6.9.2	7%	2%	0%	18%	9%	0%
381	2.5.2.2	7%	17%	7%	4%	1%	0%
437	3.1.12.3	7%	0%	29%	11%	7%	10%
524	4.3.6.2	7%	3%	14%	7%	9%	0%
623	4.8.1.2	7%	0%	14%	7%	9%	20%
724	4.10.4.2.10	7%	3%	0%	7%	12%	0%
727	4.10.4.2.13	7%	3%	7%	4%	7%	40%
735	4.10.4.7	7%	3%	0%	4%	12%	10%
768	5.3.1.6	7%	2%	14%	18%	7%	0%
769	5.3.2	7%	2%	0%	7%	14%	0%
17	1.2.6.5	6%	0%	0%	11%	11%	10%
56	1.3.1.2	6%	2%	0%	7%	8%	30%
125	1.4.1.16	6%	7%	7%	4%	8%	0%
128	1.4.1.18	6%	10%	7%	7%	4%	0%
134	1.4.1.22	6%	0%	0%	14%	11%	0%
183	1.4.4.8.1	6%	10%	0%	0%	8%	0%
185	1.4.4.8.3	6%	8%	0%	4%	7%	10%
216	1.4.6.2	6%	7%	0%	7%	8%	0%
280	1.6.1.6	6%	3%	7%	7%	8%	0%
410	3.1.6.1	6%	8%	36%	0%	3%	0%
579	4.6.7.2	6%	0%	7%	14%	9%	0%
593	4.6.15.1	6%	20%	0%	0%	0%	0%
622	4.8.1.1	6%	2%	14%	7%	7%	20%
628	4.8.1.9	6%	2%	7%	18%	7%	0%
644	4.9.4.1	6%	3%	14%	11%	5%	10%
679	4.10.1.16	6%	12%	0%	0%	5%	10%
718	4.10.4.2.3	6%	0%	7%	7%	11%	10%
734	4.10.4.6	6%	5%	7%	7%	8%	0%
760	5.2	6%	5%	7%	11%	7%	0%
852	7.3.3.1	6%	0%	7%	11%	9%	10%
15	1.2.6.3	6%	2%	0%	4%	9%	20%
16	1.2.6.4	6%	0%	0%	4%	12%	10%
18	1.2.6.6	6%	0%	0%	7%	9%	20%
143	1.4.2.3.4.1	6%	8%	0%	7%	5%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
145	1.4.2.3.4.3	6%	3%	7%	7%	8%	0%
240	1.4.6.9.2.1	6%	12%	7%	0%	3%	10%
286	1.6.4.1	6%	2%	0%	7%	11%	0%
300	2.1.6.1	6%	0%	14%	11%	8%	0%
307	2.1.10.3.1	6%	13%	7%	4%	1%	0%
332	2.1.12.4	6%	17%	7%	0%	0%	0%
365	2.5.1.1.3	6%	18%	0%	0%	0%	0%
665	4.10.1.9.5	6%	0%	0%	4%	12%	10%
676	4.10.1.13.3	6%	3%	7%	11%	7%	0%
781	5.4.4	6%	5%	0%	14%	5%	0%
10	1.2.3	5%	2%	0%	7%	9%	0%
12	1.2.5	5%	2%	0%	11%	8%	0%
37	1.2.9.3	5%	2%	7%	0%	7%	30%
47	1.2.13	5%	7%	7%	0%	7%	0%
71	1.3.6	5%	2%	0%	7%	9%	0%
97	1.4.1.5	5%	5%	0%	0%	8%	10%
256	1.4.6.11.3	5%	7%	21%	4%	3%	0%
287	1.6.4.2	5%	7%	7%	7%	4%	0%
289	1.6.4.4	5%	3%	7%	4%	7%	10%
290	1.6.4.5	5%	2%	0%	11%	8%	0%
413	3.1.7.1	5%	0%	7%	7%	8%	10%
414	3.1.8	5%	0%	7%	14%	7%	0%
477	3.2.2.8	5%	2%	0%	18%	5%	0%
498	4.1.2	5%	3%	7%	14%	4%	0%
527	4.3.9	5%	0%	7%	7%	9%	0%
556	4.5.2.3.1	5%	2%	7%	4%	8%	10%
578	4.6.7.1.7	5%	2%	7%	14%	5%	0%
624	4.8.1.3	5%	5%	7%	0%	5%	20%
634	4.8.6	5%	0%	0%	4%	11%	10%
20	1.2.7.1	5%	0%	7%	7%	8%	0%
24	1.2.8.1	5%	2%	0%	4%	7%	20%
98	1.4.1.5.1	5%	3%	7%	4%	7%	0%
132	1.4.1.21	5%	0%	14%	7%	7%	0%
279	1.6.1.5	5%	2%	14%	4%	5%	10%
344	2.1.19.1	5%	13%	7%	0%	0%	0%
385	2.5.2.4.2	5%	13%	0%	4%	0%	0%
392	2.5.2.9	5%	13%	0%	4%	0%	0%
475	3.2.2.7.1	5%	5%	14%	4%	4%	0%
552	4.5.1.2	5%	0%	7%	7%	8%	0%
580	4.6.7.2.1	5%	0%	0%	11%	8%	0%
581	4.6.7.2.2	5%	3%	7%	14%	3%	0%
610	4.7.6	5%	0%	7%	14%	5%	0%
693	4.10.2.6	5%	0%	7%	7%	8%	0%
696	4.10.2.7	5%	2%	0%	4%	9%	0%
42	1.2.11.1	4%	2%	0%	4%	7%	10%
80	1.3.2.1.3	4%	2%	0%	0%	8%	10%
88	1.4.0.4	4%	10%	0%	0%	3%	0%
104	1.4.1.6	4%	5%	7%	0%	4%	10%
163	1.4.3.4.7	4%	12%	0%	0%	1%	0%
217	1.4.6.3	4%	12%	0%	0%	1%	0%
265	1.5.1	4%	0%	7%	4%	7%	10%
282	1.6.2	4%	2%	0%	4%	7%	10%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
283	1.6.3	4%	3%	0%	4%	7%	0%
331	2.1.12.1	4%	7%	14%	4%	1%	0%
394	3.1.1	4%	0%	7%	7%	5%	10%
502	4.1.2.5	4%	2%	7%	4%	7%	0%
597	4.6.15.5	4%	13%	0%	0%	0%	0%
612	4.7.6.2	4%	0%	0%	11%	7%	0%
647	4.10.1.1.2	4%	2%	0%	7%	7%	0%
687	4.10.2.3.3	4%	3%	0%	0%	8%	0%
691	4.10.2.5.2	4%	2%	7%	7%	5%	0%
741	4.10.4.8.5	4%	0%	0%	4%	9%	0%
776	5.4	4%	0%	0%	7%	8%	0%
800	5.6	4%	2%	0%	4%	7%	10%
813	6.1	4%	0%	7%	11%	5%	0%
5	1.1.2.2	4%	3%	7%	0%	4%	10%
6	1.1.3	4%	0%	7%	4%	7%	0%
122	1.4.1.13	4%	2%	0%	7%	5%	0%
154	1.4.3.2.1	4%	7%	0%	0%	4%	0%
196	1.4.4.14	4%	0%	7%	7%	5%	0%
275	1.6.1.1	4%	0%	0%	0%	8%	10%
336	2.1.13.2	4%	12%	0%	0%	0%	0%
521	4.3.5	4%	0%	7%	4%	4%	20%
619	4.7.18.3	4%	3%	7%	4%	4%	0%
663	4.10.1.9.3	4%	2%	7%	0%	7%	0%
674	4.10.1.13.1	4%	3%	7%	4%	4%	0%
707	4.10.3.7.2	4%	3%	7%	0%	5%	0%
713	4.10.3.12.2	4%	3%	0%	11%	1%	10%
849	7.3.2.2	4%	0%	7%	11%	3%	10%
14	1.2.6.2	3%	2%	0%	0%	7%	0%
70	1.3.5	3%	5%	0%	0%	4%	0%
200	1.4.4.15	3%	2%	0%	7%	4%	0%
258	1.4.6.11.5	3%	7%	7%	0%	1%	0%
263	1.4.6.11.8	3%	7%	0%	4%	1%	0%
305	2.1.10.1	3%	5%	7%	4%	1%	0%
318	2.1.11.4.1	3%	10%	0%	0%	0%	0%
401	3.1.4.1	3%	3%	0%	4%	4%	0%
431	3.1.10.1.4	3%	3%	0%	4%	4%	0%
499	4.1.2.1	3%	3%	0%	0%	5%	0%
540	4.3.14.1	3%	7%	14%	0%	0%	0%
541	4.3.14.2	3%	7%	0%	4%	1%	0%
590	4.6.7.4.4	3%	5%	7%	4%	1%	0%
646	4.10.1.1.1	3%	0%	7%	4%	5%	0%
669	4.10.1.12	3%	0%	7%	4%	5%	0%
723	4.10.4.2.8	3%	0%	7%	0%	5%	10%
783	5.4.6	3%	2%	0%	4%	5%	0%
87	1.4.0.3	3%	5%	7%	0%	1%	0%
101	1.4.1.5.3.2	3%	2%	7%	0%	4%	0%
109	1.4.1.7.3	3%	7%	0%	0%	1%	0%
211	1.4.6.1	3%	2%	7%	0%	4%	0%
229	1.4.6.9	3%	7%	7%	0%	0%	0%
278	1.6.1.4	3%	2%	0%	4%	3%	10%
295	1.6.7	3%	0%	0%	0%	4%	20%
302	2.1.9	3%	3%	0%	4%	3%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
304	2.1.9.2	3%	5%	0%	4%	1%	0%
368	2.5.1.3.1	3%	8%	0%	0%	0%	0%
397	3.1.1.3	3%	0%	0%	14%	1%	0%
411	3.1.6.2	3%	0%	21%	0%	3%	0%
415	3.1.8.2	3%	2%	0%	4%	3%	10%
417	3.1.8.7.1	3%	3%	14%	0%	1%	0%
423	3.1.9.1	3%	2%	7%	0%	4%	0%
424	3.1.9.2	3%	3%	0%	0%	4%	0%
433	3.1.11	3%	3%	0%	0%	4%	0%
606	4.7.1.2	3%	2%	0%	0%	5%	0%
618	4.7.18.2	3%	2%	7%	0%	4%	0%
631	4.8.2.3	3%	2%	7%	4%	3%	0%
650	4.10.1.4	3%	0%	7%	4%	4%	0%
656	4.10.1.8	3%	2%	7%	0%	4%	0%
670	4.10.1.12.1	3%	0%	0%	4%	5%	0%
675	4.10.1.13.2	3%	2%	7%	4%	3%	0%
772	5.3.3.2	3%	0%	0%	0%	5%	10%
857	7.5.3	3%	0%	0%	4%	5%	0%
13	1.2.6.1	2%	0%	0%	0%	5%	0%
49	1.2.14.2	2%	2%	0%	0%	4%	0%
83	1.3.8.5.4	2%	2%	0%	0%	4%	0%
94	1.4.1.3.2	2%	0%	0%	0%	3%	20%
102	1.4.1.5.3.3	2%	5%	0%	0%	1%	0%
160	1.4.3.4.2	2%	5%	0%	4%	0%	0%
213	1.4.6.1.2	2%	3%	0%	4%	1%	0%
247	1.4.6.10	2%	3%	7%	0%	1%	0%
259	1.4.6.11.5.1	2%	7%	0%	0%	0%	0%
262	1.4.6.11.7	2%	7%	0%	0%	0%	0%
312	2.1.10.3.6	2%	7%	0%	0%	0%	0%
325	2.1.11.7	2%	2%	7%	4%	1%	0%
340	2.1.17.1.1	2%	7%	0%	0%	0%	0%
419	3.1.8.7.3	2%	7%	0%	0%	0%	0%
425	3.1.9.3	2%	2%	0%	4%	1%	10%
438	3.1.12.4	2%	2%	7%	0%	3%	0%
503	4.1.2.7	2%	0%	0%	0%	5%	0%
507	4.1.6	2%	0%	7%	4%	3%	0%
525	4.3.7	2%	0%	7%	7%	1%	0%
543	4.4.1	2%	0%	0%	0%	5%	0%
547	4.4.8	2%	0%	7%	0%	4%	0%
564	4.6.1.3	2%	5%	0%	0%	1%	0%
643	4.9.4	2%	0%	0%	4%	3%	10%
677	4.10.1.14	2%	0%	7%	4%	1%	10%
692	4.10.2.5.3	2%	0%	21%	0%	0%	10%
697	4.10.2.8	2%	0%	7%	7%	1%	0%
774	5.3.3.4.2	2%	3%	0%	7%	0%	0%
791	5.5.2.6	2%	2%	0%	4%	3%	0%
856	7.5.2	2%	0%	0%	4%	4%	0%
39	1.2.10.1.1	2%	3%	0%	0%	1%	0%
61	1.3.2.1.4	2%	0%	0%	0%	4%	0%
82	1.3.8.5.3	2%	2%	0%	0%	3%	0%
93	1.4.1.3.1	2%	0%	0%	0%	1%	20%
100	1.4.1.5.3.1	2%	0%	0%	0%	4%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
111	1.4.1.6.1	2%	0%	0%	0%	4%	0%
138	1.4.2.2.1	2%	2%	0%	0%	3%	0%
161	1.4.3.4.3	2%	5%	0%	0%	0%	0%
165	1.4.3.4.8	2%	0%	0%	4%	3%	0%
166	1.4.3.4.9	2%	3%	7%	0%	0%	0%
261	1.4.6.11.6.1	2%	5%	0%	0%	0%	0%
277	1.6.1.3	2%	2%	0%	0%	3%	0%
284	1.6.3.1.2	2%	3%	0%	0%	1%	0%
288	1.6.4.3	2%	0%	0%	0%	3%	10%
367	2.5.1.2	2%	2%	7%	0%	1%	0%
380	2.5.2.1.3	2%	0%	14%	0%	1%	0%
399	3.1.3	2%	0%	0%	4%	3%	0%
448	3.1.16	2%	0%	14%	4%	0%	0%
485	3.3.3	2%	3%	7%	0%	0%	0%
505	4.1.2.9.1	2%	0%	7%	7%	0%	0%
526	4.3.8	2%	2%	0%	0%	1%	10%
528	4.3.9.1	2%	0%	0%	4%	3%	0%
585	4.6.7.2.5	2%	0%	0%	7%	1%	0%
592	4.6.7.5	2%	2%	0%	7%	0%	0%
595	4.6.15.3	2%	5%	0%	0%	0%	0%
609	4.7.5	2%	2%	0%	0%	1%	10%
642	4.9.3.3	2%	0%	0%	7%	0%	10%
666	4.10.1.9.6	2%	0%	0%	0%	4%	0%
686	4.10.2.3.5	2%	2%	7%	0%	1%	0%
725	4.10.4.2.11	2%	0%	0%	0%	4%	0%
730	4.10.4.2.16	2%	0%	0%	4%	3%	0%
773	5.3.3.4	2%	3%	0%	0%	1%	0%
778	5.4.1.1	2%	0%	0%	4%	3%	0%
789	5.5.2.2	2%	0%	0%	0%	4%	0%
798	5.5.4	2%	2%	0%	0%	3%	0%
801	5.6.1	2%	2%	0%	0%	3%	0%
804	5.6.4	2%	0%	0%	0%	4%	0%
811	5.8	2%	0%	0%	0%	4%	0%
848	7.3.2.1	2%	0%	7%	4%	1%	0%
850	7.3.2.3	2%	0%	7%	4%	1%	0%
851	7.3.2.4	2%	0%	7%	4%	1%	0%
80	1.3.8.5.1	1%	2%	0%	0%	1%	0%
81	1.3.8.5.2	1%	0%	0%	0%	3%	0%
89	1.4.0.5	1%	0%	7%	0%	1%	0%
106	1.4.1.7.2.2	1%	0%	0%	0%	3%	0%
129	1.4.1.19	1%	0%	0%	0%	3%	0%
136	1.4.2.1	1%	0%	0%	4%	1%	0%
137	1.4.2.2	1%	0%	0%	0%	3%	0%
159	1.4.3.4.1	1%	3%	0%	0%	0%	0%
168	1.4.4.1	1%	0%	0%	0%	3%	0%
191	1.4.4.12.3	1%	0%	0%	4%	1%	0%
214	1.4.6.1.3	1%	0%	0%	4%	1%	0%
276	1.6.1.2	1%	0%	0%	4%	1%	0%
309	2.1.10.3.3	1%	0%	0%	7%	0%	0%
317	2.1.11.4	1%	3%	0%	0%	0%	0%
323	2.1.11.6.3	1%	3%	0%	0%	0%	0%
343	2.1.19	1%	3%	0%	0%	0%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
395	3.1.1.1	1%	0%	0%	4%	1%	0%
402	3.1.4.2	1%	0%	7%	0%	1%	0%
403	3.1.4.3	1%	0%	7%	0%	1%	0%
405	3.1.4.5	1%	0%	7%	0%	1%	0%
416	3.1.8.6.1	1%	2%	0%	4%	0%	0%
426	3.1.10.1.1	1%	2%	0%	4%	0%	0%
441	3.1.14.1	1%	0%	0%	0%	1%	10%
445	3.1.15.1	1%	0%	7%	0%	1%	0%
449	3.1.17	1%	2%	7%	0%	0%	0%
495	4.1.1	1%	2%	0%	0%	1%	0%
501	4.1.2.4	1%	0%	7%	0%	1%	0%
504	4.1.2.8	1%	0%	0%	0%	3%	0%
529	4.3.9.2	1%	0%	0%	0%	3%	0%
549	4.5.1.1.1	1%	2%	0%	0%	1%	0%
558	4.5.2.7	1%	0%	0%	0%	3%	0%
572	4.6.7.1.1	1%	0%	0%	4%	1%	0%
596	4.6.15.4	1%	3%	0%	0%	0%	0%
636	4.9.1	1%	0%	0%	0%	3%	0%
638	4.9.2	1%	2%	0%	0%	0%	10%
649	4.10.1.3	1%	0%	7%	4%	0%	0%
652	4.10.1.4.2	1%	0%	0%	4%	1%	0%
661	4.10.1.9.1	1%	0%	7%	0%	1%	0%
694	4.10.2.6.1	1%	0%	0%	4%	1%	0%
701	4.10.3.2.1	1%	0%	0%	4%	1%	0%
726	4.10.4.2.14	1%	0%	0%	4%	1%	0%
737	4.10.4.8	1%	0%	0%	4%	1%	0%
738	4.10.4.8.1	1%	0%	0%	0%	3%	0%
761	5.2.1	1%	0%	0%	4%	1%	0%
786	5.5	1%	0%	0%	4%	1%	0%
795	5.5.2.10	1%	0%	0%	0%	3%	0%
807	5.6.5.3	1%	2%	7%	0%	0%	0%
839	7.1.4	1%	0%	14%	0%	0%	0%
854	7.4.1	1%	0%	7%	4%	0%	0%
40	1.2.10.1.2	1%	0%	0%	0%	1%	0%
50	1.2.14.3	1%	2%	0%	0%	0%	0%
52	1.2.16	1%	0%	0%	0%	1%	0%
92	1.4.1.2	1%	0%	0%	0%	0%	10%
147	1.4.2.6	1%	0%	0%	0%	1%	0%
190	1.4.4.12.2	1%	0%	0%	0%	1%	0%
204	1.4.5.3	1%	2%	0%	0%	0%	0%
271	1.5.2.8	1%	2%	0%	0%	0%	0%
281	1.6.1.7	1%	0%	0%	0%	1%	0%
285	1.6.3.2	1%	0%	0%	0%	1%	0%
303	2.1.9.1	1%	2%	0%	0%	0%	0%
306	2.1.10.3.2	1%	2%	0%	0%	0%	0%
321	2.1.11.6.1	1%	2%	0%	0%	0%	0%
322	2.1.11.6.2	1%	2%	0%	0%	0%	0%
326	2.1.11.8	1%	2%	0%	0%	0%	0%
329	2.1.11.10	1%	2%	0%	0%	0%	0%
338	2.1.14	1%	2%	0%	0%	0%	0%
339	2.1.16	1%	0%	0%	0%	1%	0%
379	2.5.2.1.2	1%	2%	0%	0%	0%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
404	3.1.4.4	1%	0%	0%	0%	1%	0%
406	3.1.4.6	1%	0%	0%	0%	1%	0%
407	3.1.4.7	1%	0%	0%	0%	1%	0%
418	3.1.8.7.2	1%	0%	7%	0%	0%	0%
420	3.1.8.7.4	1%	2%	0%	0%	0%	0%
426	3.1.9.4	1%	0%	0%	0%	1%	0%
429	3.1.10.1.2	1%	2%	0%	0%	0%	0%
430	3.1.10.1.3	1%	2%	0%	0%	0%	0%
440	3.1.14	1%	0%	0%	0%	1%	0%
442	3.1.14.1.1	1%	0%	7%	0%	0%	0%
444	3.1.15	1%	0%	0%	0%	1%	0%
447	3.1.15.3	1%	0%	7%	0%	0%	0%
452	3.1.16	1%	2%	0%	0%	0%	0%
467	3.2.2.4.8	1%	0%	0%	0%	1%	0%
468	3.2.2.4.9	1%	0%	0%	0%	1%	0%
469	3.2.2.4.10	1%	0%	0%	0%	1%	0%
476	3.2.2.7.2	1%	0%	0%	0%	1%	0%
500	4.1.2.3	1%	2%	0%	0%	0%	0%
506	4.1.3	1%	0%	7%	0%	0%	0%
514	4.2.2.5	1%	0%	0%	0%	1%	0%
530	4.3.9.3	1%	0%	0%	0%	1%	0%
531	4.3.10	1%	2%	0%	0%	0%	0%
533	4.3.12	1%	0%	0%	0%	1%	0%
535	4.3.12.2	1%	0%	0%	0%	1%	0%
550	4.5.1.1.2	1%	0%	0%	4%	0%	0%
555	4.5.2.2	1%	0%	7%	0%	0%	0%
557	4.5.2.3.2	1%	0%	0%	0%	1%	0%
571	4.6.7	1%	0%	0%	4%	0%	0%
582	4.6.7.2.3	1%	0%	0%	0%	1%	0%
583	4.6.7.2.3.1	1%	0%	0%	0%	1%	0%
589	4.6.7.4.3	1%	0%	7%	0%	0%	0%
602	4.6.15.14.1	1%	2%	0%	0%	0%	0%
608	4.7.2.2	1%	0%	0%	4%	0%	0%
651	4.10.1.4.1	1%	0%	0%	4%	0%	0%
654	4.10.1.6	1%	0%	0%	0%	1%	0%
658	4.10.1.8.1.1	1%	0%	0%	0%	1%	0%
659	4.10.1.8.2.2	1%	2%	0%	0%	0%	0%
660	4.10.1.9	1%	0%	0%	0%	1%	0%
680	4.10.1.16.3	1%	0%	0%	0%	1%	0%
681	4.10.1.16.3.1	1%	0%	0%	0%	1%	0%
682	4.10.1.16.3.2	1%	0%	0%	0%	1%	0%
684	4.10.2.1	1%	0%	7%	0%	0%	0%
686	4.10.2.2.1	1%	0%	0%	0%	1%	0%
689	4.10.2.5	1%	0%	0%	4%	0%	0%
690	4.10.2.5.1	1%	0%	0%	4%	0%	0%
695	4.10.2.6.3	1%	0%	0%	4%	0%	0%
702	4.10.3.3	1%	2%	0%	0%	0%	0%
703	4.10.3.4	1%	0%	0%	0%	1%	0%
706	4.10.3.7.1	1%	0%	0%	0%	1%	0%
708	4.10.3.8	1%	0%	7%	0%	0%	0%
711	4.10.3.11.4	1%	0%	7%	0%	0%	0%
739	4.10.4.8.3	1%	0%	0%	0%	1%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
751	4.12.2.1	1%	2%	0%	0%	0%	0%
753	4.12.3	1%	2%	0%	0%	0%	0%
771	5.3.3.1	1%	0%	0%	4%	0%	0%
780	5.4.3	1%	0%	7%	0%	0%	0%
782	5.4.5	1%	0%	0%	0%	1%	0%
785	5.4.8	1%	0%	7%	0%	0%	0%
788	5.5.2.1	1%	0%	0%	0%	1%	0%
792	5.5.2.7	1%	0%	0%	0%	1%	0%
793	5.5.2.8	1%	2%	0%	0%	0%	0%
796	5.5.2.10.1	1%	0%	0%	0%	1%	0%
806	5.6.5.2	1%	0%	7%	0%	0%	0%
809	5.7	1%	0%	0%	0%	1%	0%
810	5.7.1	1%	0%	0%	4%	0%	0%
817	6.3.3	1%	2%	0%	0%	0%	0%
837	7.1.1	1%	0%	7%	0%	0%	0%

APPENDIX #7

RANKING OF CRITICAL STANDARDS IN ORDER OF ACMRDD STANDARDS

Appendix #7 consists of exactly the same data on each Standard as was presented in Appendix #6 above. However, the Standards in Appendix #7, instead of being listed in descending order of difficulty for all 186 surveyed agencies, are presented in the order in which they appear in the ACMRDD Standards. Therefore, it is possible to refer to that document and determine, for each standard, the actual requirement.

APPENDIX # 7

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
2	1.1.1	41%	55%	57%	25%	31%	60%
3	1.1.2	47%	38%	29%	57%	57%	30%
4	1.1.2.1	30%	28%	64%	21%	28%	20%
5	1.1.2.2	4%	3%	7%	0%	4%	10%
6	1.1.3	4%	0%	7%	4%	7%	0%
8	1.2.1	9%	5%	14%	11%	11%	0%
9	1.2.2.1	20%	2%	21%	21%	31%	50%
10	1.2.3	5%	2%	0%	7%	9%	0%
12	1.2.5	5%	2%	0%	11%	8%	0%
13	1.2.6.1	2%	0%	0%	0%	5%	0%
14	1.2.6.2	3%	2%	0%	0%	7%	0%
15	1.2.6.3	6%	2%	0%	4%	9%	20%
16	1.2.6.4	6%	0%	0%	4%	12%	10%
17	1.2.6.5	6%	0%	0%	11%	11%	10%
18	1.2.6.6	6%	0%	0%	7%	9%	20%
19	1.2.6.7	13%	3%	29%	11%	19%	20%
20	1.2.7.1	5%	0%	7%	7%	8%	0%
21	1.2.7.2	27%	22%	36%	29%	28%	30%
22	1.2.7.3	26%	22%	29%	29%	27%	30%
23	1.2.7.4	24%	17%	36%	21%	28%	20%
24	1.2.8.1	5%	2%	0%	4%	7%	20%
25	1.2.8.2	26%	3%	14%	36%	38%	60%
26	1.2.8.3	48%	20%	50%	57%	64%	70%
27	1.2.8.4	58%	15%	43%	86%	81%	80%
28	1.2.8.5	58%	58%	50%	57%	57%	70%
29	1.2.8.5.1	22%	18%	7%	4%	32%	30%
30	1.2.8.6	47%	30%	50%	54%	57%	60%
31	1.2.8.6.1	20%	13%	14%	18%	24%	40%
32	1.2.8.7	32%	8%	21%	46%	46%	50%
33	1.2.8.7.1	15%	10%	7%	11%	19%	30%
34	1.2.8.8	20%	8%	14%	29%	26%	40%
35	1.2.8.9	10%	10%	7%	7%	9%	20%
36	1.2.9.2	72%	77%	71%	71%	66%	80%
37	1.2.9.3	5%	2%	7%	0%	7%	30%
38	1.2.10	13%	5%	21%	18%	18%	10%
39	1.2.10.1.1	2%	3%	0%	0%	1%	0%
40	1.2.10.1.2	1%	0%	0%	0%	1%	0%
41	1.2.11	39%	23%	21%	46%	49%	70%
42	1.2.11.1	4%	2%	0%	4%	7%	10%
44	1.2.12.2	10%	15%	14%	7%	8%	0%
45	1.2.12.3	28%	23%	36%	36%	27%	40%
46	1.2.12.4	48%	30%	21%	46%	62%	90%
47	1.2.13	5%	7%	7%	0%	7%	0%
49	1.2.14.2	2%	2%	0%	0%	4%	0%
50	1.2.14.3	1%	2%	0%	0%	0%	0%
51	1.2.15	10%	12%	0%	14%	8%	20%
52	1.2.16	1%	0%	0%	0%	1%	0%
54	1.3.1	53%	62%	71%	39%	45%	70%
55	1.3.1.1	24%	13%	21%	29%	31%	30%
56	1.3.1.2	6%	2%	0%	7%	8%	30%
57	1.3.2	94%	93%	100%	86%	96%	100%
58	1.3.2.1.1	25%	43%	14%	21%	14%	20%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
59	1.3.2.1.2	15%	10%	7%	21%	16%	30%
60	1.3.2.1.3	4%	2%	0%	0%	8%	10%
61	1.3.2.1.4	2%	0%	0%	0%	4%	0%
62	1.3.3	92%	88%	100%	93%	92%	100%
63	1.3.3.1	69%	67%	50%	64%	76%	70%
64	1.3.3.2.1	67%	67%	86%	57%	65%	80%
65	1.3.3.2.2	42%	33%	50%	50%	42%	70%
66	1.3.3.2.3	73%	67%	86%	68%	77%	80%
67	1.3.3.2.4	25%	25%	21%	21%	28%	20%
68	1.3.3.2.5	32%	28%	43%	29%	31%	50%
69	1.3.4	10%	7%	14%	4%	12%	20%
70	1.3.5	3%	5%	0%	0%	4%	0%
71	1.3.6	5%	2%	0%	7%	9%	0%
72	1.3.7	79%	77%	79%	79%	78%	100%
73	1.3.7.1	80%	77%	93%	79%	81%	80%
74	1.3.7.3	47%	48%	57%	46%	43%	50%
75	1.3.8	11%	8%	7%	7%	15%	20%
76	1.3.8.1	51%	53%	57%	50%	46%	70%
77	1.3.8.2	29%	45%	14%	14%	26%	20%
78	1.3.8.3	15%	17%	0%	21%	15%	0%
79	1.3.8.4	11%	8%	7%	11%	16%	0%
80	1.3.8.5.1	1%	2%	0%	0%	1%	0%
81	1.3.8.5.2	1%	0%	0%	0%	3%	0%
82	1.3.8.5.3	2%	2%	0%	0%	3%	0%
83	1.3.8.5.4	2%	2%	0%	0%	4%	0%
85	1.4.0.1	13%	10%	0%	4%	23%	0%
87	1.4.0.3	3%	5%	7%	0%	1%	0%
88	1.4.0.4	4%	10%	0%	0%	3%	0%
89	1.4.0.5	1%	0%	7%	0%	1%	0%
91	1.4.1.1	13%	2%	7%	18%	22%	20%
92	1.4.1.2	1%	0%	0%	0%	0%	10%
93	1.4.1.3.1	2%	0%	0%	0%	1%	20%
94	1.4.1.3.2	2%	0%	0%	0%	3%	20%
95	1.4.1.3.3	15%	2%	7%	21%	23%	30%
96	1.4.1.4	18%	13%	21%	11%	24%	10%
97	1.4.1.5	5%	5%	0%	0%	8%	10%
98	1.4.1.5.1	5%	3%	7%	4%	7%	0%
99	1.4.1.5.3	28%	43%	21%	7%	26%	20%
100	1.4.1.5.3.1	2%	0%	0%	0%	4%	0%
101	1.4.1.5.3.2	3%	2%	7%	0%	4%	0%
102	1.4.1.5.3.3	2%	5%	0%	0%	1%	0%
103	1.4.1.5.3.4	37%	53%	43%	11%	31%	40%
104	1.4.1.6	4%	5%	7%	0%	4%	10%
105	1.4.1.6.5.1	8%	3%	7%	7%	11%	20%
106	1.4.1.6.5.2	9%	3%	7%	11%	12%	10%
107	1.4.1.7.2.1	41%	3%	36%	61%	64%	60%
108	1.4.1.7.2.2	1%	0%	0%	0%	3%	0%
109	1.4.1.7.3	3%	7%	0%	0%	1%	0%
110	1.4.1.8	11%	25%	7%	0%	5%	10%
111	1.4.1.8.1	2%	0%	0%	0%	4%	0%
113	1.4.1.10	30%	3%	0%	29%	54%	50%
114	1.4.1.10.1	15%	17%	14%	4%	14%	50%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
115	1.4.1.10.2	27%	40%	36%	14%	16%	60%
116	1.4.1.10.3	15%	0%	7%	14%	26%	30%
117	1.4.1.11	8%	0%	7%	18%	11%	0%
118	1.4.1.11.1	7%	2%	7%	11%	9%	10%
119	1.4.1.11.2	10%	2%	7%	11%	18%	10%
120	1.4.1.11.3	16%	0%	14%	32%	23%	20%
121	1.4.1.12	14%	3%	29%	14%	20%	10%
122	1.4.1.13	4%	2%	0%	7%	5%	0%
123	1.4.1.14	50%	18%	43%	75%	69%	40%
125	1.4.1.16	6%	7%	7%	4%	6%	0%
126	1.4.1.17	8%	20%	7%	4%	0%	10%
127	1.4.1.17.1	9%	0%	7%	14%	16%	0%
128	1.4.1.18	6%	10%	7%	7%	4%	0%
129	1.4.1.19	1%	0%	0%	0%	3%	0%
130	1.4.1.19.2	83%	70%	100%	82%	91%	90%
131	1.4.1.20	22%	3%	43%	36%	23%	50%
132	1.4.1.21	5%	0%	14%	7%	7%	0%
133	1.4.1.21.1	9%	5%	0%	21%	9%	10%
134	1.4.1.22	6%	0%	0%	14%	11%	0%
136	1.4.2.1	1%	0%	0%	4%	1%	0%
137	1.4.2.2	1%	0%	0%	0%	3%	0%
138	1.4.2.2.1	2%	2%	0%	0%	3%	0%
139	1.4.2.3	12%	3%	14%	18%	18%	10%
140	1.4.2.3.1	15%	8%	21%	11%	23%	0%
141	1.4.2.3.2	10%	10%	14%	7%	11%	0%
142	1.4.2.3.3	17%	10%	21%	18%	23%	10%
143	1.4.2.3.4.1	6%	8%	0%	7%	5%	0%
144	1.4.2.3.4.2	9%	5%	14%	11%	11%	10%
145	1.4.2.3.4.3	6%	3%	7%	7%	8%	0%
147	1.4.2.6	1%	0%	0%	0%	1%	0%
151	1.4.2.7.6	12%	10%	21%	7%	12%	20%
153	1.4.3.1	24%	27%	14%	14%	26%	30%
154	1.4.3.2.1	4%	7%	0%	0%	4%	0%
155	1.4.3.2.2	27%	25%	21%	14%	31%	60%
156	1.4.3.2.3	37%	27%	36%	39%	41%	60%
157	1.4.3.2.4	21%	23%	29%	18%	16%	40%
158	1.4.3.2.5	55%	52%	57%	46%	61%	60%
159	1.4.3.4.1	1%	3%	0%	0%	0%	0%
160	1.4.3.4.2	2%	5%	0%	4%	0%	0%
161	1.4.3.4.3	2%	5%	0%	0%	0%	0%
162	1.4.3.4.6	13%	32%	7%	0%	4%	10%
163	1.4.3.4.7	4%	12%	0%	0%	1%	0%
164	1.4.3.4.7.1	9%	22%	0%	0%	5%	0%
165	1.4.3.4.8	2%	0%	0%	4%	3%	0%
166	1.4.3.4.9	2%	3%	7%	0%	0%	0%
168	1.4.4.1	1%	0%	0%	0%	3%	0%
169	1.4.4.2	13%	15%	7%	4%	18%	10%
170	1.4.4.3.1	65%	72%	71%	79%	53%	70%
171	1.4.4.3.2	67%	70%	64%	70%	61%	60%
172	1.4.4.3.3	66%	72%	57%	75%	59%	60%
173	1.4.4.3.4	9%	7%	0%	14%	12%	0%
174	1.4.4.3.5	47%	53%	50%	46%	41%	50%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
175	1.4.4.4	69%	80%	64%	79%	58%	60%
176	1.4.4.4.1	19%	18%	14%	18%	23%	0%
177	1.4.4.4.2	37%	33%	14%	36%	47%	20%
178	1.4.4.5	10%	8%	7%	7%	12%	10%
179	1.4.4.6.2	28%	22%	14%	21%	39%	30%
180	1.4.4.6.3	11%	13%	7%	11%	11%	0%
181	1.4.4.6.4	13%	5%	7%	18%	20%	0%
182	1.4.4.6.5	12%	13%	7%	18%	12%	0%
183	1.4.4.8.1	6%	10%	0%	0%	8%	0%
184	1.4.4.8.2	7%	12%	0%	0%	7%	10%
185	1.4.4.8.3	6%	8%	0%	4%	7%	10%
186	1.4.4.9	8%	15%	0%	4%	4%	10%
187	1.4.4.10	8%	8%	0%	7%	11%	0%
190	1.4.4.12.2	1%	0%	0%	0%	1%	0%
191	1.4.4.12.3	1%	0%	0%	4%	1%	0%
195	1.4.4.14	4%	0%	7%	7%	5%	0%
196	1.4.4.14.1	9%	2%	14%	14%	14%	0%
197	1.4.4.14.2	18%	13%	14%	29%	19%	20%
198	1.4.4.14.3	14%	13%	7%	25%	11%	20%
199	1.4.4.14.4	16%	15%	21%	25%	12%	10%
200	1.4.4.15	3%	2%	0%	7%	4%	0%
204	1.4.5.3	1%	2%	0%	0%	0%	0%
211	1.4.6.1	3%	2%	7%	0%	4%	0%
212	1.4.6.1.1	21%	8%	29%	39%	24%	10%
213	1.4.6.1.2	2%	3%	0%	4%	1%	0%
214	1.4.6.1.3	1%	0%	0%	4%	1%	0%
215	1.4.6.1.4	34%	32%	21%	46%	32%	50%
216	1.4.6.2	6%	7%	0%	7%	8%	0%
217	1.4.6.3	4%	12%	0%	0%	1%	0%
220	1.4.6.6	13%	3%	7%	18%	22%	10%
221	1.4.6.7.1	10%	12%	21%	0%	12%	0%
222	1.4.6.8	53%	48%	43%	61%	59%	30%
223	1.4.6.8.1.1	12%	8%	14%	18%	12%	20%
224	1.4.6.8.1.2	16%	17%	21%	18%	14%	20%
225	1.4.6.8.1.3	8%	5%	14%	14%	7%	10%
226	1.4.6.8.1.4	17%	15%	21%	14%	16%	40%
227	1.4.6.8.1.5	21%	15%	29%	21%	24%	20%
228	1.4.6.8.2	46%	47%	57%	39%	45%	50%
229	1.4.6.9	3%	7%	7%	0%	0%	0%
230	1.4.6.9.1	22%	42%	36%	4%	11%	10%
231	1.4.6.9.1.1.1	7%	15%	14%	4%	1%	0%
232	1.4.6.9.1.1.2	8%	20%	7%	4%	0%	0%
233	1.4.6.9.1.1.3	8%	18%	14%	4%	0%	0%
234	1.4.6.9.1.1.4	9%	18%	21%	4%	1%	0%
235	1.4.6.9.1.1.5	9%	23%	7%	0%	3%	0%
236	1.4.6.9.1.2.1	21%	43%	43%	4%	8%	0%
237	1.4.6.9.1.2.2	20%	42%	43%	4%	8%	0%
238	1.4.6.9.1.3	19%	35%	29%	7%	9%	10%
239	1.4.6.9.2	7%	2%	0%	18%	9%	0%
240	1.4.6.9.2.1	6%	12%	7%	0%	3%	10%
241	1.4.6.9.2.1.1	11%	17%	29%	7%	5%	10%
242	1.4.6.9.2.2	10%	27%	14%	4%	0%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
244	1.4.6.9.2.4	10%	28%	14%	0%	0%	0%
247	1.4.6.10	2%	3%	7%	0%	1%	0%
248	1.4.6.10.1	71%	58%	71%	71%	81%	70%
249	1.4.6.10.1.1	67%	47%	64%	64%	86%	60%
250	1.4.6.10.1.2	75%	72%	86%	61%	82%	70%
251	1.4.6.10.1.4.1	76%	73%	79%	64%	82%	70%
252	1.4.6.10.1.4.2	76%	75%	71%	61%	84%	70%
253	1.4.6.11.1.1	15%	27%	36%	4%	4%	20%
254	1.4.6.11.1.2	16%	32%	43%	4%	4%	0%
255	1.4.6.11.2	18%	38%	29%	4%	5%	10%
256	1.4.6.11.3	5%	7%	21%	4%	3%	0%
257	1.4.6.11.4	19%	37%	29%	7%	9%	10%
258	1.4.6.11.5	3%	7%	7%	0%	1%	0%
259	1.4.6.11.5.1	2%	7%	0%	0%	0%	0%
261	1.4.6.11.6.1	2%	5%	0%	0%	0%	0%
262	1.4.6.11.7	2%	7%	0%	0%	0%	0%
263	1.4.6.11.8	3%	7%	0%	4%	1%	0%
265	1.5.1	4%	0%	7%	4%	7%	10%
266	1.5.1.1	8%	12%	7%	4%	7%	0%
267	1.5.2.1	95%	93%	93%	100%	95%	100%
268	1.5.2.2	70%	65%	50%	82%	73%	80%
269	1.5.2.5	13%	12%	7%	14%	18%	0%
270	1.5.2.6	13%	12%	14%	14%	16%	0%
271	1.5.2.8	1%	2%	0%	0%	0%	0%
272	1.5.3	10%	7%	7%	7%	15%	0%
274	1.6.1	10%	7%	21%	4%	12%	20%
275	1.6.1.1	4%	0%	0%	0%	8%	10%
276	1.6.1.2	1%	0%	0%	4%	1%	0%
277	1.6.1.3	2%	2%	0%	0%	3%	0%
278	1.6.1.4	3%	2%	0%	4%	3%	10%
279	1.6.1.5	5%	2%	14%	4%	5%	10%
280	1.6.1.6	6%	5%	7%	7%	8%	0%
281	1.6.1.7	1%	0%	0%	0%	1%	0%
282	1.6.2	4%	2%	0%	4%	7%	10%
283	1.6.3	4%	3%	0%	4%	7%	0%
284	1.6.3.1.2	2%	3%	0%	0%	1%	0%
285	1.6.3.2	1%	0%	0%	0%	1%	0%
286	1.6.4.1	6%	2%	0%	7%	11%	0%
287	1.6.4.2	5%	7%	7%	7%	4%	0%
288	1.6.4.3	2%	0%	0%	0%	3%	10%
289	1.6.4.4	5%	3%	7%	4%	7%	10%
290	1.6.4.5	5%	2%	0%	11%	8%	0%
291	1.6.5.1	39%	50%	43%	25%	31%	70%
292	1.6.5.2	71%	55%	71%	89%	77%	70%
293	1.6.5.3	58%	42%	64%	64%	66%	60%
294	1.6.6	18%	20%	21%	21%	14%	30%
295	1.6.7	3%	0%	0%	0%	4%	20%
299	2.1.6	31%	53%	50%	18%	16%	10%
300	2.1.6.1	6%	0%	14%	11%	8%	0%
301	2.1.7	43%	97%	79%	7%	11%	10%
302	2.1.9	3%	3%	0%	4%	3%	0%
303	2.1.9.1	1%	2%	0%	0%	0%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
304	2.1.9.2	3%	5%	0%	4%	1%	0%
305	2.1.10.1	3%	5%	7%	4%	1%	0%
306	2.1.10.2	12%	35%	7%	0%	0%	0%
307	2.1.10.3.1	6%	13%	7%	4%	1%	0%
308	2.1.10.3.2	1%	2%	0%	0%	0%	0%
309	2.1.10.3.3	1%	0%	0%	7%	0%	0%
310	2.1.10.3.4	9%	22%	0%	11%	1%	0%
311	2.1.10.3.5	33%	63%	57%	14%	11%	40%
312	2.1.10.3.6	2%	7%	0%	0%	0%	0%
313	2.1.11	19%	48%	29%	4%	1%	10%
314	2.1.11.1	16%	45%	7%	4%	1%	0%
315	2.1.11.2	22%	57%	21%	0%	5%	0%
317	2.1.11.4	1%	3%	0%	0%	0%	0%
318	2.1.11.4.1	3%	10%	0%	0%	0%	0%
319	2.1.11.5.1	10%	25%	7%	4%	1%	0%
320	2.1.11.5.2	14%	22%	7%	14%	9%	10%
321	2.1.11.6.1	1%	2%	0%	0%	0%	0%
322	2.1.11.6.2	1%	2%	0%	0%	0%	0%
323	2.1.11.6.3	1%	3%	0%	0%	0%	0%
325	2.1.11.7	2%	2%	7%	4%	1%	0%
326	2.1.11.8	1%	2%	0%	0%	0%	0%
327	2.1.11.9	13%	33%	21%	0%	0%	10%
328	2.1.11.9.1	33%	78%	71%	4%	4%	10%
329	2.1.11.10	1%	2%	0%	0%	0%	0%
331	2.1.12.1	4%	7%	14%	4%	1%	0%
332	2.1.12.4	6%	17%	7%	0%	0%	0%
333	2.1.12.4.1	9%	27%	0%	4%	0%	0%
334	2.1.13	9%	23%	7%	0%	3%	0%
335	2.1.13.1	10%	27%	14%	0%	0%	0%
336	2.1.13.2	4%	12%	0%	0%	0%	0%
337	2.1.13.4	21%	57%	7%	0%	3%	20%
338	2.1.14	1%	2%	0%	0%	0%	0%
339	2.1.16	1%	0%	0%	0%	1%	0%
340	2.1.17.1.1	2%	7%	0%	0%	0%	0%
341	2.1.17.1.2	13%	33%	21%	4%	0%	0%
343	2.1.19	1%	3%	0%	0%	0%	0%
344	2.1.19.1	5%	13%	7%	0%	0%	0%
364	2.5.1.1.1	27%	67%	64%	4%	1%	0%
365	2.5.1.1.3	6%	18%	0%	0%	0%	0%
366	2.5.1.1.4	35%	73%	50%	14%	9%	30%
367	2.5.1.2	2%	2%	7%	0%	1%	0%
368	2.5.1.3.1	3%	8%	0%	0%	0%	0%
369	2.5.1.3.4	39%	90%	86%	14%	3%	10%
370	2.5.1.3.7	26%	72%	21%	4%	1%	10%
371	2.5.1.3.8	9%	10%	0%	29%	4%	0%
373	2.5.1.3.9	16%	42%	21%	0%	0%	10%
374	2.5.1.3.10.1	41%	87%	93%	21%	7%	10%
375	2.5.1.3.10.2	19%	43%	21%	11%	3%	10%
378	2.5.2.1.1	13%	20%	14%	7%	12%	0%
379	2.5.2.1.2	1%	2%	0%	0%	0%	0%
380	2.5.2.1.3	2%	0%	14%	0%	1%	0%
381	2.5.2.2	7%	17%	7%	4%	1%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
382	2.5.2.3	12%	27%	36%	4%	0%	10%
383	2.5.2.4	8%	2%	14%	7%	11%	10%
384	2.5.2.4.1	19%	32%	57%	0%	9%	10%
385	2.5.2.4.2	5%	13%	0%	4%	0%	0%
386	2.5.2.4.3	13%	20%	7%	4%	14%	0%
387	2.5.2.5	22%	25%	29%	32%	16%	0%
388	2.5.2.5.1	13%	37%	21%	0%	0%	0%
389	2.5.2.5.2	15%	37%	21%	4%	3%	0%
391	2.5.2.8	25%	63%	29%	0%	3%	20%
392	2.5.2.9	5%	13%	0%	4%	0%	0%
394	3.1.1	4%	0%	7%	7%	5%	10%
395	3.1.1.1	1%	0%	0%	4%	1%	0%
396	3.1.1.2	10%	7%	7%	18%	8%	20%
397	3.1.1.3	3%	0%	0%	14%	1%	0%
398	3.1.2.1	9%	2%	7%	18%	14%	0%
399	3.1.3	2%	0%	0%	4%	3%	0%
400	3.1.4	74%	70%	79%	61%	82%	70%
401	3.1.4.1	3%	3%	0%	4%	4%	0%
402	3.1.4.2	1%	0%	7%	0%	1%	0%
403	3.1.4.3	1%	0%	7%	0%	1%	0%
404	3.1.4.4	1%	0%	0%	0%	1%	0%
405	3.1.4.5	1%	0%	7%	0%	1%	0%
406	3.1.4.6	1%	0%	0%	0%	1%	0%
407	3.1.4.7	1%	0%	0%	0%	1%	0%
410	3.1.6.1	6%	8%	36%	0%	3%	0%
411	3.1.6.2	3%	0%	21%	0%	3%	0%
412	3.1.7	9%	0%	14%	7%	18%	0%
413	3.1.7.1	5%	0%	7%	7%	8%	10%
414	3.1.8	5%	0%	7%	14%	7%	0%
415	3.1.8.2	3%	2%	0%	4%	3%	10%
416	3.1.8.6.1	1%	2%	0%	4%	0%	0%
417	3.1.8.7.1	3%	3%	14%	0%	1%	0%
418	3.1.8.7.2	1%	0%	7%	0%	0%	0%
419	3.1.8.7.3	2%	7%	0%	0%	0%	0%
420	3.1.8.7.4	1%	2%	0%	0%	0%	0%
421	3.1.8.8	11%	8%	7%	25%	11%	0%
422	3.1.9	8%	0%	7%	14%	14%	0%
423	3.1.9.1	3%	2%	7%	0%	4%	0%
424	3.1.9.2	3%	3%	0%	0%	4%	0%
425	3.1.9.3	2%	2%	0%	4%	1%	10%
426	3.1.9.4	1%	0%	0%	0%	1%	0%
427	3.1.10	13%	3%	7%	32%	16%	10%
428	3.1.10.1.1	1%	2%	0%	4%	0%	0%
429	3.1.10.1.2	1%	2%	0%	0%	0%	0%
430	3.1.10.1.3	1%	2%	0%	0%	0%	0%
431	3.1.10.1.4	3%	3%	0%	4%	4%	0%
432	3.1.10.2.2	10%	8%	0%	7%	14%	20%
433	3.1.11	3%	3%	0%	0%	4%	0%
434	3.1.12	47%	30%	43%	57%	57%	60%
437	3.1.12.3	7%	0%	29%	11%	7%	10%
438	3.1.12.4	2%	2%	7%	0%	3%	0%
439	3.1.13	48%	45%	50%	46%	55%	10%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
440	3.1.14	1%	0%	0%	0%	1%	0%
441	3.1.14.1	1%	0%	0%	0%	1%	10%
442	3.1.14.1.1	1%	0%	7%	0%	0%	0%
444	3.1.15	1%	0%	0%	0%	1%	0%
445	3.1.15.1	1%	0%	7%	0%	1%	0%
447	3.1.15.3	1%	0%	7%	0%	0%	0%
448	3.1.16	2%	0%	14%	4%	0%	0%
449	3.1.17	1%	2%	7%	0%	0%	0%
452	3.1.18	1%	2%	0%	0%	0%	0%
453	3.1.18.1	15%	33%	21%	4%	4%	10%
454	3.1.19	14%	13%	21%	14%	12%	20%
458	3.2.1.1	19%	18%	14%	18%	23%	0%
467	3.2.2.4.8	1%	0%	0%	0%	1%	0%
468	3.2.2.4.9	1%	0%	0%	0%	1%	0%
469	3.2.2.4.10	1%	0%	0%	0%	1%	0%
475	3.2.2.7.1	5%	5%	14%	4%	4%	0%
476	3.2.2.7.2	1%	0%	0%	0%	1%	0%
477	3.2.2.8	5%	2%	0%	18%	5%	0%
479	3.2.3.1	19%	13%	43%	29%	15%	20%
480	3.2.3.3	16%	7%	14%	18%	23%	10%
484	3.3.2.2	34%	32%	36%	25%	45%	0%
485	3.3.3	2%	3%	7%	0%	0%	0%
495	4.1.1	1%	2%	0%	0%	1%	0%
496	4.1.1.1	80%	97%	100%	71%	66%	80%
497	4.1.1.2	27%	47%	43%	21%	12%	20%
498	4.1.2	5%	3%	7%	14%	4%	0%
499	4.1.2.1	3%	3%	0%	0%	5%	0%
500	4.1.2.3	1%	2%	0%	0%	0%	0%
501	4.1.2.4	1%	0%	7%	0%	1%	0%
502	4.1.2.5	4%	2%	7%	4%	7%	0%
503	4.1.2.7	2%	0%	0%	0%	5%	0%
504	4.1.2.8	1%	0%	0%	0%	3%	0%
505	4.1.2.9.1	2%	0%	7%	7%	0%	0%
506	4.1.3	1%	0%	7%	0%	0%	0%
507	4.1.6	2%	0%	7%	4%	3%	0%
508	4.1.6.1	44%	43%	64%	46%	36%	60%
510	4.2.1	6%	2%	7%	7%	12%	10%
514	4.2.2.5	1%	0%	0%	0%	1%	0%
516	4.3.1.1	9%	0%	7%	11%	15%	20%
521	4.3.5	4%	0%	7%	4%	4%	20%
522	4.3.5.1	10%	3%	29%	18%	9%	10%
524	4.3.6.2	7%	3%	14%	7%	9%	0%
525	4.3.7	2%	0%	7%	7%	1%	0%
526	4.3.8	2%	2%	0%	0%	1%	10%
527	4.3.9	5%	0%	7%	7%	9%	0%
528	4.3.9.1	2%	0%	0%	4%	3%	0%
529	4.3.9.2	1%	0%	0%	0%	3%	0%
530	4.3.9.3	1%	0%	0%	0%	1%	0%
531	4.3.10	1%	2%	0%	0%	0%	0%
532	4.3.11	17%	2%	14%	39%	23%	10%
533	4.3.12	1%	0%	0%	0%	1%	0%
535	4.3.12.2	1%	0%	0%	0%	1%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
536	4.3.13	9%	3%	14%	18%	11%	0%
537	4.3.13.1	19%	10%	0%	21%	28%	30%
538	4.3.13.2	10%	7%	0%	4%	14%	30%
539	4.3.13.4	13%	8%	14%	11%	14%	40%
540	4.3.14.1	3%	7%	14%	0%	0%	0%
541	4.3.14.2	3%	7%	0%	4%	1%	0%
543	4.4.1	2%	0%	0%	0%	5%	0%
547	4.4.8	2%	0%	7%	0%	4%	0%
549	4.5.1.1.1	1%	2%	0%	0%	1%	0%
550	4.5.1.1.2	1%	0%	0%	4%	0%	0%
552	4.5.1.2	5%	0%	7%	7%	8%	0%
554	4.5.2.1	8%	2%	14%	7%	14%	0%
555	4.5.2.2	1%	0%	7%	0%	0%	0%
556	4.5.2.3.1	5%	2%	7%	4%	8%	10%
557	4.5.2.3.2	1%	0%	0%	0%	1%	0%
558	4.5.2.7	1%	0%	0%	0%	3%	0%
560	4.6.1	41%	45%	43%	39%	39%	30%
561	4.6.1.1.1	10%	7%	0%	14%	14%	0%
562	4.6.1.1.2	12%	8%	7%	4%	20%	0%
564	4.6.1.3	2%	5%	0%	0%	1%	0%
565	4.6.1.4	9%	12%	21%	0%	9%	0%
566	4.6.2	28%	40%	43%	0%	30%	0%
570	4.6.3	11%	5%	7%	7%	20%	0%
571	4.6.7	1%	0%	0%	4%	0%	0%
572	4.6.7.1.1	1%	0%	0%	4%	1%	0%
578	4.6.7.1.7	5%	2%	7%	14%	5%	0%
579	4.6.7.2	6%	0%	7%	14%	9%	0%
580	4.6.7.2.1	5%	0%	0%	11%	8%	0%
581	4.6.7.2.2	5%	3%	7%	14%	3%	0%
582	4.6.7.2.3	1%	0%	0%	0%	1%	0%
583	4.6.7.2.3.1	1%	0%	0%	0%	1%	0%
585	4.6.7.2.5	2%	0%	0%	7%	1%	0%
589	4.6.7.4.3	1%	0%	7%	0%	0%	0%
590	4.6.7.4.4	3%	5%	7%	4%	1%	0%
592	4.6.7.5	2%	2%	0%	7%	0%	0%
593	4.6.15.1	6%	20%	0%	0%	0%	0%
595	4.6.15.3	2%	5%	0%	0%	0%	0%
596	4.6.15.4	1%	3%	0%	0%	0%	0%
597	4.6.15.5	4%	13%	0%	0%	0%	0%
602	4.6.15.14.1	1%	2%	0%	0%	0%	0%
605	4.7.1.1	42%	67%	36%	25%	34%	20%
606	4.7.1.2	3%	2%	0%	0%	5%	0%
607	4.7.2	8%	23%	0%	4%	0%	0%
608	4.7.2.2	1%	0%	0%	4%	0%	0%
609	4.7.5	2%	2%	0%	0%	1%	10%
610	4.7.6	5%	0%	7%	14%	5%	0%
611	4.7.6.1	12%	0%	7%	29%	19%	0%
612	4.7.6.2	4%	0%	0%	11%	7%	0%
618	4.7.18.2	3%	2%	7%	0%	4%	0%
619	4.7.18.3	4%	3%	7%	4%	4%	0%
621	4.8.1	8%	0%	0%	0%	19%	10%
622	4.8.1.1	6%	2%	14%	7%	7%	20%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
623	4.8.1.2	7%	0%	14%	7%	9%	20%
624	4.8.1.3	5%	5%	7%	0%	5%	20%
625	4.8.1.4	9%	2%	20%	14%	11%	0%
626	4.8.1.6	13%	12%	21%	25%	8%	10%
627	4.8.1.7	12%	17%	14%	18%	8%	0%
628	4.8.1.9	6%	2%	7%	18%	7%	0%
629	4.8.2.1	10%	2%	14%	18%	12%	20%
630	4.8.2.2	9%	2%	7%	18%	11%	10%
631	4.8.2.3	3%	2%	7%	4%	3%	0%
632	4.8.2.4	13%	5%	14%	21%	16%	20%
633	4.8.3	27%	20%	7%	32%	32%	40%
634	4.8.6	5%	0%	0%	4%	11%	10%
636	4.9.1	1%	0%	0%	0%	3%	0%
638	4.9.2	1%	2%	0%	0%	0%	10%
639	4.9.3	10%	2%	21%	21%	9%	20%
642	4.9.3.3	2%	0%	0%	7%	0%	10%
643	4.9.4	2%	0%	0%	4%	3%	10%
644	4.9.4.1	6%	3%	14%	11%	5%	10%
646	4.10.1.1.1	3%	0%	7%	4%	5%	0%
647	4.10.1.1.2	4%	2%	0%	7%	7%	0%
649	4.10.1.3	1%	0%	7%	4%	0%	0%
650	4.10.1.4	3%	0%	7%	4%	4%	0%
651	4.10.1.4.1	1%	0%	0%	4%	0%	0%
652	4.10.1.4.2	1%	0%	0%	4%	1%	0%
654	4.10.1.6	1%	0%	0%	0%	1%	0%
656	4.10.1.8	3%	2%	7%	0%	4%	0%
658	4.10.1.8.1.1	1%	0%	0%	0%	1%	0%
659	4.10.1.8.2.2	1%	2%	0%	0%	0%	0%
660	4.10.1.9	1%	0%	0%	0%	1%	0%
661	4.10.1.9.1	1%	0%	7%	0%	1%	0%
662	4.10.1.9.2	13%	3%	7%	14%	22%	10%
663	4.10.1.9.3	4%	2%	7%	0%	7%	0%
664	4.10.1.9.4	18%	23%	0%	11%	19%	30%
665	4.10.1.9.5	6%	0%	0%	4%	12%	10%
666	4.10.1.9.6	2%	0%	0%	0%	4%	0%
669	4.10.1.12	3%	0%	7%	4%	5%	0%
670	4.10.1.12.1	3%	0%	0%	4%	5%	0%
673	4.10.1.13	33%	12%	21%	57%	43%	40%
674	4.10.1.13.1	4%	3%	7%	4%	4%	0%
675	4.10.1.13.2	3%	2%	7%	4%	3%	0%
676	4.10.1.13.3	6%	3%	7%	11%	7%	0%
677	4.10.1.14	2%	0%	7%	4%	1%	10%
679	4.10.1.16	6%	12%	0%	0%	5%	10%
680	4.10.1.16.3	1%	0%	0%	0%	1%	0%
681	4.10.1.16.3.1	1%	0%	0%	0%	1%	0%
682	4.10.1.16.3.2	1%	0%	0%	0%	1%	0%
684	4.10.2.1	1%	0%	7%	0%	0%	0%
686	4.10.2.2.1	1%	0%	0%	0%	1%	0%
687	4.10.2.3.3	4%	3%	0%	0%	8%	0%
688	4.10.2.3.5	2%	2%	7%	0%	1%	0%
689	4.10.2.5	1%	0%	0%	4%	0%	0%
690	4.10.2.5.1	1%	0%	0%	4%	0%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
691	4.10.2.5.2	4%	2%	7%	7%	5%	0%
692	4.10.2.5.3	2%	0%	21%	0%	0%	10%
693	4.10.2.6	5%	0%	7%	7%	8%	0%
694	4.10.2.6.1	1%	0%	0%	4%	1%	0%
695	4.10.2.6.3	1%	0%	0%	4%	0%	0%
696	4.10.2.7	5%	2%	0%	4%	9%	0%
697	4.10.2.8	2%	0%	7%	7%	1%	0%
701	4.10.3.2.1	1%	0%	0%	4%	1%	0%
702	4.10.3.3	1%	2%	0%	0%	0%	0%
703	4.10.3.4	1%	0%	0%	0%	1%	0%
704	4.10.3.5	15%	8%	29%	29%	11%	20%
705	4.10.3.7	12%	13%	7%	14%	11%	20%
706	4.10.3.7.1	1%	0%	0%	0%	1%	0%
707	4.10.3.7.2	4%	3%	7%	0%	5%	0%
708	4.10.3.8	1%	0%	7%	0%	0%	0%
710	4.10.3.11.2	8%	0%	21%	14%	11%	0%
711	4.10.3.11.4	1%	0%	7%	0%	0%	0%
712	4.10.3.12.1	13%	7%	14%	18%	18%	10%
713	4.10.3.12.2	4%	3%	0%	11%	1%	10%
715	4.10.4.1	12%	8%	14%	14%	14%	10%
716	4.10.4.2.1	17%	3%	21%	18%	24%	40%
717	4.10.4.2.2	44%	33%	57%	50%	43%	70%
718	4.10.4.2.3	6%	0%	7%	7%	11%	10%
719	4.10.4.2.4	15%	12%	14%	11%	20%	10%
720	4.10.4.2.5	11%	3%	7%	11%	19%	10%
721	4.10.4.2.6	18%	10%	36%	25%	19%	20%
722	4.10.4.2.7	25%	18%	29%	32%	22%	60%
723	4.10.4.2.8	3%	0%	7%	0%	5%	10%
724	4.10.4.2.10	7%	3%	0%	7%	12%	0%
725	4.10.4.2.11	2%	0%	0%	0%	4%	0%
726	4.10.4.2.12	10%	0%	7%	11%	18%	20%
727	4.10.4.2.13	7%	3%	7%	4%	7%	40%
728	4.10.4.2.14	1%	0%	0%	4%	1%	0%
729	4.10.4.2.15	10%	0%	7%	14%	16%	20%
730	4.10.4.2.16	2%	0%	0%	4%	3%	0%
731	4.10.4.3	9%	7%	0%	7%	12%	10%
732	4.10.4.4	45%	17%	57%	54%	62%	50%
733	4.10.4.5	19%	13%	29%	32%	18%	20%
734	1.10.4.6	6%	5%	7%	7%	8%	0%
735	4.10.4.7	7%	3%	0%	4%	12%	10%
737	4.10.4.8	1%	0%	0%	4%	1%	0%
738	4.10.4.8.1	1%	0%	0%	0%	3%	0%
739	4.10.4.8.3	1%	0%	0%	0%	1%	0%
741	4.10.4.8.5	4%	0%	0%	4%	9%	0%
743	4.11.1	43%	25%	43%	71%	46%	50%
744	4.11.3	58%	52%	57%	79%	55%	50%
745	4.11.5	17%	28%	14%	14%	11%	10%
747	4.12.1	21%	20%	36%	11%	24%	10%
748	4.12.1.1	9%	18%	14%	0%	4%	0%
749	4.12.1.2	16%	18%	7%	18%	16%	10%
750	4.12.2	12%	17%	0%	4%	15%	0%
751	4.12.2.1	1%	2%	0%	0%	0%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
752	4.12.2.2	19%	43%	7%	14%	7%	0%
753	4.12.3	1%	2%	0%	0%	0%	0%
754	4.12.4	39%	87%	79%	21%	5%	0%
755	4.12.6	10%	3%	0%	29%	12%	0%
759	5.1	17%	27%	14%	21%	9%	0%
760	5.2	6%	5%	7%	11%	7%	0%
761	5.2.1	1%	0%	0%	4%	1%	0%
762	5.3	13%	0%	14%	21%	19%	20%
763	5.3.1.1	10%	3%	0%	21%	14%	0%
764	5.3.1.2	10%	3%	0%	14%	15%	10%
765	5.3.1.3	18%	5%	21%	25%	26%	20%
766	5.3.1.4	9%	2%	0%	14%	15%	0%
767	5.3.1.5	17%	7%	21%	25%	19%	30%
768	5.3.1.6	7%	2%	14%	18%	7%	0%
769	5.3.2	7%	2%	0%	7%	14%	0%
770	5.3.3	39%	32%	43%	61%	39%	20%
771	5.3.3.1	1%	0%	0%	4%	0%	0%
772	5.3.3.2	3%	0%	0%	0%	5%	10%
773	5.3.3.4	2%	3%	0%	0%	1%	0%
774	5.3.3.4.2	2%	3%	0%	7%	0%	0%
775	5.3.3.5	35%	17%	36%	50%	45%	30%
776	5.4	4%	0%	0%	7%	8%	0%
777	5.4.1	12%	2%	21%	25%	15%	10%
778	5.4.1.1	2%	0%	0%	4%	3%	0%
779	5.4.2	8%	7%	0%	7%	11%	10%
780	5.4.3	1%	0%	7%	0%	0%	0%
781	5.4.4	6%	5%	0%	14%	5%	0%
782	5.4.5	1%	0%	0%	0%	1%	0%
783	5.4.6	3%	2%	0%	4%	5%	0%
785	5.4.8	1%	0%	7%	0%	0%	0%
786	5.5	1%	0%	0%	4%	1%	0%
787	5.5.1	17%	40%	0%	11%	5%	10%
788	5.5.2.1	1%	0%	0%	0%	1%	0%
789	5.5.2.2	2%	0%	0%	0%	4%	0%
791	5.5.2.6	2%	2%	0%	4%	3%	0%
792	5.5.2.7	1%	0%	0%	0%	1%	0%
793	5.5.2.8	1%	2%	0%	0%	0%	0%
795	5.5.2.10	1%	0%	0%	0%	3%	0%
796	5.5.2.10.1	1%	0%	0%	0%	1%	0%
798	5.5.4	2%	2%	0%	0%	3%	0%
799	5.5.5	33%	37%	29%	46%	28%	20%
800	5.6	4%	2%	0%	4%	7%	10%
801	5.6.1	2%	2%	0%	0%	3%	0%
802	5.6.2	9%	3%	14%	11%	14%	0%
803	5.6.3	16%	5%	21%	29%	18%	20%
804	5.6.4	2%	0%	0%	0%	4%	0%
806	5.6.5.2	1%	0%	7%	0%	0%	0%
807	5.6.5.3	1%	2%	7%	0%	0%	0%
808	5.6.7	11%	5%	14%	14%	14%	20%
809	5.7	1%	0%	0%	0%	1%	0%
810	5.7.1	1%	0%	0%	4%	0%	0%
811	5.8	2%	0%	0%	0%	4%	0%

Index Number (Order in Standards)	AC MRDD Code Number	% Deficient in All Agencies	Large Public Residen.	Large Private Residen.	Small Private Residen.	Private Non-Res	Public Non-Res
813	6.1	4%	0%	7%	11%	5%	0%
817	6.3.3	1%	2%	0%	0%	0%	0%
837	7.1.1	1%	0%	7%	0%	0%	0%
838	7.1.3	11%	0%	21%	21%	15%	0%
839	7.1.4	1%	0%	14%	0%	0%	0%
840	7.1.5.2	16%	17%	36%	21%	11%	0%
841	7.1.6	12%	3%	36%	25%	9%	10%
848	7.3.2.1	2%	0%	7%	4%	1%	0%
849	7.3.2.2	4%	0%	7%	11%	3%	10%
850	7.3.2.3	2%	0%	7%	4%	1%	0%
851	7.3.2.4	2%	0%	7%	4%	1%	0%
852	7.3.3.1	6%	0%	7%	11%	9%	10%
854	7.4.1	1%	0%	7%	4%	0%	0%
856	7.5.2	2%	0%	0%	4%	4%	0%
857	7.5.3	3%	0%	0%	4%	5%	0%

APPENDIX #8

162 STANDARDS WITH WHICH ALL AGENCIES WERE ASSUMED TO BE IN COMPLIANCE

The following three pages enumerate the 162 Category A standards with which none of the 186 agencies surveyed in 1983-84 appeared to be in less than full compliance. Review of the summary statements for these standards indicates that they are primarily requirements which are so basic that, if an agency is providing that service component, it is certain to be in compliance with that standard. In other instances, particularly where several consecutive standards are included in the Appendix, it probably indicates that this was a program component which was not offered by any of the agencies surveyed by ACMRDD in 1983-84.

A third possible reason for inclusion of standards on this Appendix is that surveyors assumed agencies to be in full compliance, since there was no evidence to the contrary. The reader, therefore, is cautioned not to infer that this is automatically a list of "dispensable" Standards. Most or all may in fact be relevant to agencies offering service components not available (not applicable) within the group of 186 agencies considered by the Project--in other words, agencies which potentially could be surveyed by ACMRDD.

APPENDIX # 8

Number Order in Standard	AC MRDD Code Number	Description of Standard
11	1.2.4	Assessments are conducted in individual's residence
43	1.2.12.1	Reassessments provided at time of crisis
48	1.2.14.1	Individual, family and/or advocate involved in assessment process
86	1.4.0.2	Agency has made effort to initiate life-span programs
112	1.4.1.9	Individuals who cannot drink are given adequate fluids
124	1.4.1.15	Medications only used by individual to whom issued
146	1.4.2.5	Agency promotes generic community transportation services for DD individuals
148	1.4.2.7.2	Transportation system has current state inspection report
149	1.4.2.7.3	Transportation system has adequate insurance
150	1.4.2.7.4	Agency transportation system not overloaded
188	1.4.4.11	Agency provides work-related follow-along
189	1.4.4.12.1	Agency familiarizes employers with agency's work training programs
192	1.4.4.12.4	Agency helps workers adjust to specific work environments
193	1.4.4.12.5	Agency helps employer understand special needs of individual
194	1.4.4.12.6	Agency helps employer adapt work environment to special needs
202	1.4.5.1	Agency initiates generic community recreation programs if not available
203	1.4.5.2	Agency informs its population of opportunities for recreation
206	1.4.5.4.3	Leisure time agencies give disabled participation with non-disabled
208	1.4.5.5.1	Recreation agencies develop both group and individual leisure skills
209	1.4.5.5.2	Recreation agencies develop social contact both sexes, all ages
218	1.4.6.4.2	Behavior management does not deny nutritional diet
219	1.4.6.5	Individuals served do not discipline others, unless self-government policy
243	1.4.6.9.2.3	Restraints cause the least possible discomfort
245	1.4.6.9.2.5	Totally enclosed cribs considered to be restraints in agency policy
246	1.4.6.9.2.5.1	Totally enclosed cribs used only if written policy
260	1.4.6.11.6	Restraints as time-out used only in structured program
297	2.1.2	Agency helps individual and family find appropriate living arrangement
315	2.1.11.3.1	Multiply handicapped and nonambulatory have daily activity and exercise
324	2.1.11.6.4	Residents' outgoing mail not read by staff, unless requested
330	2.1.12	Three daily meals at regular times
342	2.1.18	Individual washcloths and towels are used
346	2.2.1.1.1	Homemaker agencies' services available to disabled at home
347	2.2.1.1.2	Homemaker agencies' services available to disabled in their own homes
348	2.2.1.2	Homemaker agency has written plan to recruit, select, train staff
349	2.2.1.3	Homemaker agency staff teaches appropriate independent living skills
351	2.3.1	Temp. Assist. Living agency has written plan for recruiting, training staff
353	2.4.1	Surrogate family agency has written plan for selecting, evaluating homes
354	2.4.1.1	Surrogate family agency's homes appropriately licensed, approved
355	2.4.1.2	Surrogate family agency homes monitored at least quarterly
356	2.4.1.3	Surrogate family agency homes evaluated at least annually
357	2.4.2	Surrogate family agency orients and trains surrogate families
358	2.4.3	Surrogate family agency provided with ongoing training
359	2.4.5	Surrogate family agency family maintains appropriate records
360	2.4.6.1	Surrogate family agency monitors financial transactions to benefit individual
361	2.4.7	Surrogate family agency contracts with each surrogate family
363	2.5.1.1	Grouping of program and residence units meets needs of individuals
372	2.5.1.3.8.2	Doors do not have vision panels unless indicated by program needs
377	2.5.2.1	Congregate living agency staff attend to care and development of residents
390	2.5.2.7	Congregate living agency unit staff have appropriate supervisor
408	3.1.5	Legal competence determination separate from residential care decision
409	3.1.5.1	Court orders obtained when necessary for detention, commitment
435	3.1.12.1	Individual's record secured against loss, destruction or unauthorized use
436	3.1.12.2	Individual's record removed only when court order, subpoena or statute
443	3.1.14.1.2	Dietary practices of individual's faith observed if requested
446	3.1.15.2	Agency personnel permitted to talk with family about day-to-day activity
450	3.1.17.1.1	Close relatives permitted to visit at reasonable time without notice

451	3.1.17.2	Visitors to residences do not infringe on privacy
455	3.1.20	Except emergency, individual/family consent to transfer
456	3.1.21	Coroner or medical examiner notified of deaths, per state law
460	3.2.2.4.1	Personal advocacy agency identifies individuals who need advocates
461	3.2.2.4.2	Personal advocacy agency provides individua/family with orientation
462	3.2.2.4.3	Personal advocacy agency recruits, selects, assesses advocates
463	3.2.2.4.4	Personal advocacy agency matches individual to right advocate
464	3.2.2.4.5	Personal advocacy agency orients and trains advocates
465	3.2.2.4.6	Personal advocacy agency assists advocates with legal, professional services
466	3.2.2.4.7	Personal advocacy agency evaluates each advocate quarterly
470	3.2.2.5	Personal advocacy agency advocates monitor individual's program plan
471	3.2.2.5.1	Agency advocate is known to individual's program coordinator
472	3.2.2.5.2	Personal advocate is known to individual's protective services wkr.
474	3.2.2.7	Agency collaborates with personal advocacy agency
482	3.3.1	Protective services provided for any in need
483	3.3.2	Agency assists individual, family, court in determining advocacy need
487	3.3.4	Agency collaborates with protective services agency
488	3.3.5	Plan for agency collaboration if protective services not available
490	3.3.6	Protective service agency is independent of direct service agency
492	3.3.13	Agency provides assessment of guardianship needs for the court
493	3.3.15	Agency assures no financial interest of guardian in services provided
511	4.2.2.1	Agency activities identify individuals in need of services
512	4.2.2.2	Agency locates services needed by individuals
513	4.2.2.3	Agency activities assist individuals to enter service delivery system
517	4.3.2	Agency obtains, provides, coordinates entry into service delivery system
518	4.3.2.2	Staff members responsible for entry interview readily accessible
519	4.3.3	Agency is point of referral and follow-up into service delivery system
520	4.3.3.1	Agency obtains information to make appropriate referrals
523	4.3.6	Agency plans pre-placement visits to alternative living arrangement
534	4.3.12.1	Agency counsels individual, family when they request termination of services
545	4.4.4	Follow-along agency monitors progress, support services for long-range goal
546	4.4.5	Follow-along agency gives individual specific point of contact
563	4.6.1.2	Professionals participate on interdisciplinary teams
567	4.6.2.1	Professionals adhere to ethics and standards of practice
568	4.6.2.2	Professional services maintain necessary records
569	4.6.2.2.1	Records from other service agencies forwarded with individual permission
573	4.6.7.1.2	Food and nutrition services responsible for initiating food orders
574	4.6.7.1.3	Food and nutrition services specify food purchases
575	4.6.7.1.4	Food and nutrition services responsible for storing and handling food
576	4.6.7.1.5	Food and nutrition services responsible for food preparation
577	4.6.7.1.6	Food and nutrition services responsible for food serving
584	4.6.7.2.3.2	Menus adjusted for seasonal changes
586	4.6.7.3.1	Foods prepared to conserve nutritive value
587	4.6.7.3.2	Foods prepared to enhance flavor
588	4.6.7.3.3	Foods prepared to enhance appearance
591	4.6.7.4.5	Food is served with appropriate utensils
594	4.6.15.2	Pharmacist receives original or direct copy of MD's drug order
598	4.6.15.8	Pharmacist establishes quality specifications for drug purchases
599	4.6.15.12	Pharmacist packages, labels, despenses all drugs
600	4.6.15.13	Pharmacist readies drugs which require dosage measurements
601	4.6.15.14	Pharmacy has approved formulary system
603	4.6.15.14.2	Agency's pharmacy has current pharmaceutical reference material
613	4.7.8.3.1.1	Nurse practitioner completes ANA or equivalent formal training program
614	4.7.8.3.1.2	Nurse as nurse practitioner has available, designated medical preceptor
615	4.7.10.4	O.T. graduates have American Occupational Therapy Assn. or equivalent
616	4.7.11.4	P.T. graduates have American Physical Therapy Assn or equivalent
617	4.7.18.1	Transportation system drivers have current, valid licenses
637	4.9.1.1	Volunteers provide appropriate direct/in-direct service
640	4.9.3.1	Volunteer participation open to both sexes, all races, creeds, ages
641	4.9.3.2	Volunteer participation complies with state laws, such as labor and insurance

648	4.10.1.2	Agency documents source of operating authority
653	4.10.1.5	Agency's governing body as appropriately qualified chief executive officer
655	4.10.1.6.3	Employees know supervisors and emergency procedures
657	4.10.1.8.1	Agency has current table of organization
667	4.10.1.10	Various communications used to foster understanding among staff
668	4.10.1.11	Agency has copies of relevant laws, rules and regulations
671	4.10.1.12.2	Policy manual consistent with agency's philosophy and objectives
672	4.10.1.12.8	Policy manual in compliance with applicable laws and regulations
699	4.10.3.1	Adequate personnel administration for the size and function of agency
678	4.10.1.15	Agency's fund raising complies with local, state laws and ethical practices
700	4.10.3.2	Agency has statement of personnel policies and practices
709	4.10.3.9	Agency has job description for each staff member
736	4.10.4.7.13	Data on individuals served reported to appropriate state, federal agencies
740	4.10.4.8.4	Individuals' records retained as specified by agency or by state law
756	4.12.8.1	Daily clothing and linen needs are met without delay
757	4.12.8.2	Laundry services managed to minimize clothing loss and damage
784	5.4.7	Adequate safety shields on moving parts of machinery
790	5.5.2.3	No person with communicable disease works in food service
794	5.5.2.9	Food left over is discarded
797	5.5.3	Waste and garbage disposed of properly
805	5.6.5.1	Drug preparation areas properly secured
815	6.3	Research agencies have policy on research of staff, services or individuals
816	6.3.1	Agency staff consulted on research, based on their competence, interest
818	6.4.1	Staff member assigned as liaison for each project of outside investigator
819	6.6	Agency has interdisciplinary research team that includes non-staff members
820	6.6.2.2	Agency's interdisciplinary research committee reviews ethics of research
821	6.6.2.3	Agency's research committee reviews research per Federal law
822	6.7.1	Agency's human rights committee assures protection of individuals
823	6.7.2	Research consent forms obtained by adequate and appropriate methods
824	6.7.3	Research is not detrimental to individual welfare
825	6.8.1	Consent procedures explain procedures, and which are experimental
826	6.8.2	Consent procedures describe attendant discomforts and risks
827	6.8.3	Consent procedures describe expected benefits
828	6.8.4	Consent procedures disclose appropriate alternative procedures
829	6.8.5	Consent procedures provide to answer any inquiries of procedures
830	6.8.6	Consent procedures have statement subject is free to withdraw
831	6.8.7	No written or oral agreement to research waives any rights of subject
832	6.8.8	Methods of obtaining research consent reviewed at least annually
833	6.9.1	Researchers adhere to professional ethics
834	6.9.2	Researchers obtain consent from each subject, or can access consent record
835	6.10.1	Outside researchers must inform just like agency staff
843	7.2.1	Resource information agency provides contact for agencies, professionals
844	7.2.2	Data documentation agencies coordinate with others to avoid duplication
845	7.2.2.3	Data documentation agencies disseminate community ed and social action info.
846	7.2.2.4	Data documentation agencies provide planners feedback on service rejections
856	7.5.4	Agency establishes relationships with other manpower training programs